



CALIFORNIA ELIGIBILITY AND ENROLLMENT REPORT:

INSURANCE AFFORDABILITY PROGRAMS

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

For the Reporting Period
April 2015 through September 2015

Contents

Background	3
Highlights From April- September 2015	4
Data Sources	5
Overview.....	6
Applications Received.....	9
Individuals Included on Applications and Applicant Demographics	14
Individuals Included on Applications	15
Applicant Demographics (Gender, Age).....	16
Applicant Demographics (Race).....	17
Applicant Demographics (Ethnicity).....	18
Applicant Demographics (Written Language)	19
Applicant Demographics (Spoken Language).....	20
Eligible Individuals	21
Demographics of Eligible Individuals (Gender, Age).....	23
Demographics of Eligible Individuals (Race).....	24
Demographics of Eligible Individuals (Ethnicity).....	25
Demographics of Eligible Individuals (Written Language)	26
Demographics of Eligible Individuals (Spoken Language).....	27
Demographics of Eligible Individuals (Gender, Age).....	28
Demographics of Eligible Individuals (Race/Ethnicity)	29
Demographics of Eligible Individuals (Language).....	30
Health Plan Enrollment.....	31
Health Plan Enrollment (Covered California Health Plans).....	32
Health Plan Enrollment (Covered California)	35
Health Plan Enrollment (Medi-Cal Health Plans)	37
Renewals	39
Medi-Cal Coverage Renewals – Case Level	40
Appeals	41
Total Enrollment In Medi-Cal And Qualified Health Plans	43
Total Enrollment – Medi-Cal	455
Net Change In Enrollment – Medi-Cal	477
Total Enrollment – Qualified Health Plans	499
ERRATA	50

BACKGROUND

With the launch of Covered California¹ in 2013 and the expansion of Medicaid in 2014, Californians have access to a range of affordable health insurance choices. 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, which requires quarterly reporting on eligibility and enrollment processes for all California insurance affordability programs, including California's Medicaid Program (Medi-Cal), the Medi-Cal Access Program (MCAP), and Qualified Health Plans (QHPs) available through Covered California.

This report presents application, eligibility, and enrollment data covering the period from April 1, 2015, through September 30, 2015. The report focuses on the initial steps and outcomes of the enrollment process for new applicants during this reporting period, including the submission channel through which applications were received, consumer assistance in filing applications, applicant demographics, resulting eligibility determinations, enrollee demographics, plan enrollment choices, renewals, and the volume and outcome of eligibility appeals. As data becomes available, future quarterly reports will incorporate additional measures, such as trends in disenrollment among current beneficiaries.

¹ Covered California is California's Health Benefit Exchange and serves as its marketplace for insurance affordability programs. Tax credits and subsidies are available to Californians, with incomes between 133 percent and 400 percent of the federal poverty level, who enroll in Qualified Health Plans (QHP) offered by Covered California. This report does not include data on the Covered California for Small Business, which is also operated by Covered California.

HIGHLIGHTS FROM APRIL– SEPTEMBER 2015

How Many Californians Applied for and Enrolled in Health Insurance?

- From April – September 2015, approximately 700,000 California residents applied and were determined eligible for Medi-Cal; a decrease of 20 percent from the first quarter of 2015, in which the 2015 Open Enrollment period concluded. During this reporting period, total enrollment in Medi-Cal increased by a net of approximately 342,000 individuals inclusive of new enrollment and disenrollment.
- From April – September 2015, more than 150,000 California residents applied, were determined eligible, and selected QHPs offered through Covered California during special enrollment periods that followed qualifying life events (such as the loss of job-based coverage or the birth of a child).

Which Californians Applied for and Enrolled in Health Insurance?

- Children and youth (ages 0 to 17) continued to represent the largest share of applicants (36 percent) through the California Healthcare Eligibility, Enrollment, and Retention System (CalHEERS).² Young adults (ages 18 to 25) accounted for an additional 14 percent of applicants during April – September 2015.
- The share of applicants, whose primary spoken language was Spanish (31 percent), is similar to that reported in the previous quarter (28 percent). Of those, who reported an ethnicity in CalHEERS, approximately 49 percent of new Medi-Cal enrollees and 26 percent of those, who selected a QHP during this reporting period, identified as Hispanic.
- Among QHP enrollees, who selected a plan during this reporting period, 80 percent are receiving advance premium tax credits (APTC) and/or cost-sharing reductions, which reduce their costs of maintaining health insurance and obtaining care. More than half of subsidized QHP enrollees enrolled during this reporting period have household incomes at or below 200 percent of the federal poverty level (FPL).

How Did Californians Apply for Coverage?

- Among those determined eligible for Covered California QHPs during April – September 2015, 74 percent of applications were filed with assistance, similar to the previous reporting period (71 percent).
- Approximately 50 percent of all applications submitted through CalHEERS from April – September 2015, were initiated online (with and without assistance). In addition, 28 percent of all applications received through County Human Services Agency Offices, were initiated in-person, followed by online applications through www.BenefitsCal.com (18 percent).

² CalHEERS supports applications for enrollment submitted through CoveredCA.com www.CoveredCA.com and is jointly sponsored by Covered California and the DHCS. CalHEERS is both 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 shop for, compare, and purchase affordable QHPs, or determine if they qualify for no-cost or low-cost Medi-Cal coverage. The tools available at CoveredCA.com are designed to help consumers understand if they are eligible for financial help and, for QHP coverage, pick the right plan and benefit package to best meet their needs for coverage.

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.³
- 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 Systems (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
 - Los Angeles Eligibility, Automated Determination, Evaluation and Reporting (LEADER) which supports Los Angeles County.
- Application and enrollment data for Medi-Cal health plans and the MCAP are provided by Health Care Options in partnership with the Department of Health Care Services (DHCS).
- Appeals data are provided by the California Department of Social Services (CDSS). Appeals for both Covered California and Medi-Cal are processed and adjudicated by Administrative Law Judges and staff at CDSS.

³ Once eligibility for MAGI Medi-Cal is established by CalHEERS, the eligibility determination information is imported from CalHEERS into SAWS and MEDS through an electronic transfer, known as the Electronic Health Information Exchange. 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. MEDS is the state system of record for Medi-Cal.

OVERVIEW

Data Sources and Methods (in reference to the overview figure, next page)

The count of applications received through all venues (blue box, top row of the overview figure, page 8) includes applications submitted in one of five ways: 1) through CalHEERS; 2) directly to County Human Services Agency offices; 3) through Hospital Presumptive Eligibility (HPE); 4) through MCAP; 5) through Express Lane; and 6) transition from APTC to Medi-Cal.

The count of individuals included on applications (yellow box in the overview figure) includes:

- Individuals applying for benefits through CalHEERS, excluding other household members not applying for benefits
- Individuals new to Medi-Cal through Express Lane
- Individuals new to Medi-Cal through a Transition⁴ from APTC to Medi-Cal

Individual-level data are not available for this reporting period on applications submitted to County Human Services Agency offices through SAWS, MCAP, or HPE; therefore, the count of individuals included on applications displayed in the yellow box for these three venues includes:

- The number of individuals included on applications submitted to County Human Services Agency offices through SAWS, as reported by CalHEERS
- The number of MCAP applications submitted, estimated to be one applicant per application
- The number of HPE applications submitted, estimated to be one applicant per application

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

The count of individuals eligible for coverage (grey boxes, third row of the overview figure) includes all individuals who applied and were determined eligible for QHPs or Medi-Cal (both MAGI and non-MAGI) and MCAP. They are a subset of the count of individuals included on applications (yellow box in the overview figure) and represent those applicants approved for coverage in this reporting period. In addition, the count of individuals eligible for coverage through Medi-Cal includes individuals who did not submit an application, but were automatically enrolled in Medi-Cal as a result of receiving Supplemental Security Income (SSI) or CalWORKs. The difference in the count of individuals included on applications versus the count of individuals eligible, in-part, reflects individuals ineligible for coverage through California's insurance affordability programs.

⁴ DHCS and Covered CA facilitate the transition of individuals from APTC to Medi-Cal to avoid gaps in coverage.

OVERVIEW

Plan selection data are presented for individuals eligible for enrollment in a QHP (teal boxes, bottom/left of the overview figure). This report refers to QHP enrollments for individuals eligible for APTC and/or cost-sharing reductions at the time of enrollment as “Subsidy Eligible.” The difference between the number of individuals eligible for enrollment in a QHP, and the number of individuals who selected a QHP (both subsidy eligible and not subsidy eligible), are those who did not make a plan selection. Individuals who select a plan are not fully enrolled until they effectuate their enrollment by paying their first month’s premium.

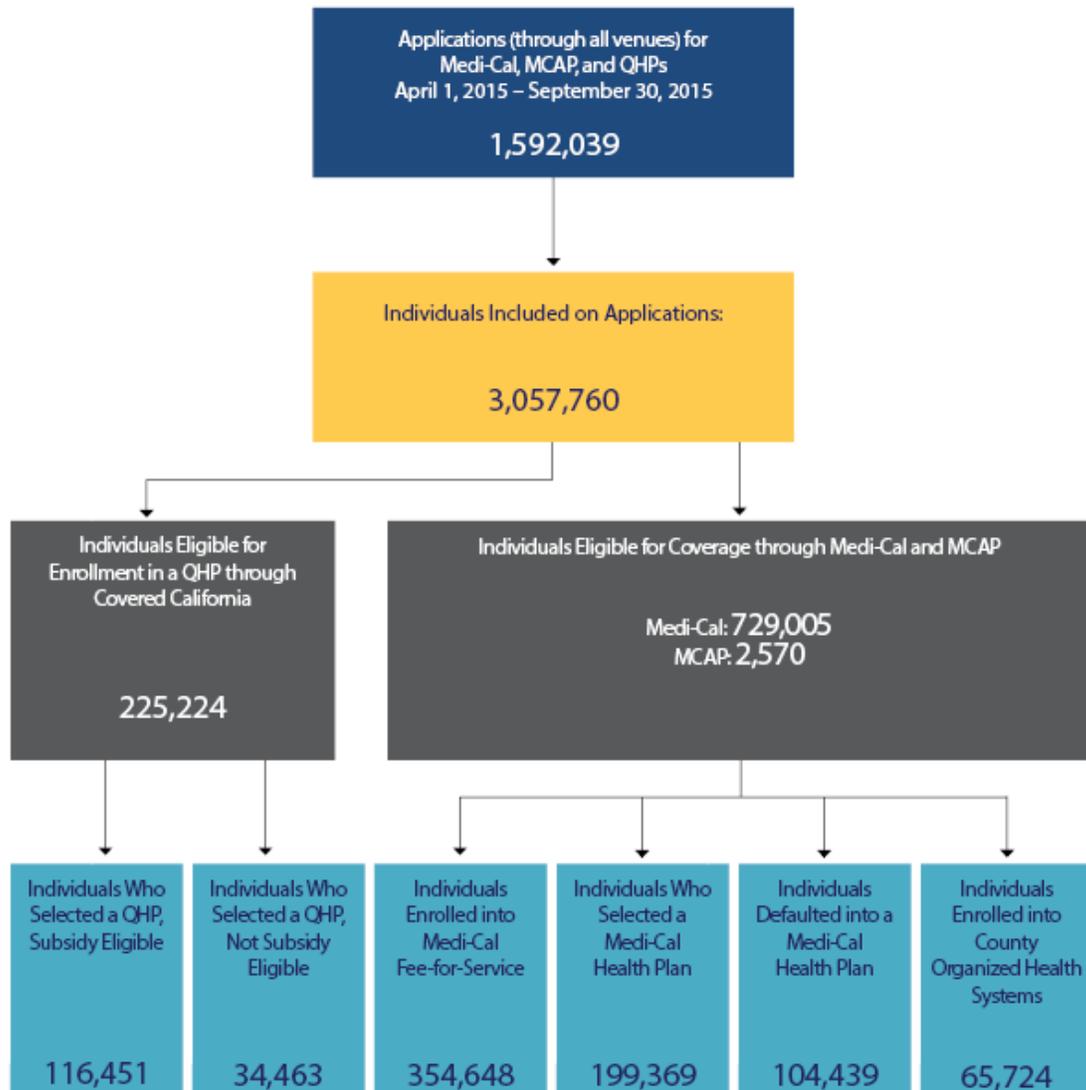
Health plan enrollment data⁵ are also presented for Medi-Cal eligible individuals (teal boxes, bottom/right of the overview figure). Several factors contribute to the difference in the count of individuals eligible for coverage through Medi-Cal, and the total count of individuals enrolled in Medi-Cal health plans or fee-for-service⁶ (FFS): 1) individuals newly eligible in the reporting period and enrolled into a Medi-Cal health plan, without record of whether the enrollment was a selection or a default; 2) individuals eligible for enrollment into a Medi-Cal health plan, but 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.

This report presents California application, eligibility, and enrollment data from April 1, 2015, through September 30, 2015. The report responds to AB x1 1 (J. Perez) Chapter 3, Statutes of 2013, W&I Code Section 14102.5, which requires quarterly reporting on application, eligibility, and enrollment processes for all California insurance affordability programs, including Medi-Cal, MCAP, and QHPs available through Covered California.

⁵ These data do not include MCAP enrollees.

⁶ Individuals not eligible for full-scope Medi-Cal are enrolled into FFS.

OVERVIEW



Note: For a detailed explanation of these counts, please see the methods described on p. 6.

- The count of applications received through all venues (blue box) includes applications submitted in one of five ways: 1) through CalHEERS; 2) directly to County Human Services Agency offices; 3) through Hospital Presumptive Eligibility (HPE); 4) through MCAP; 5) through Express Lane; and 6) transition from APTC to Medi-Cal.
- The count of individuals included on applications (yellow box) includes individuals applying for benefits through CalHEERS and SAWS; and also includes individuals new to Medi-Cal through Express Lane, HPE, MCAP, and those transitioning from APTC to Medi-Cal.
- The count of Individuals eligible for coverage through Medi-Cal and MCAP (grey box) is a subset of individuals included on applications, with the addition of those automatically enrolled in Medi-Cal as a result of receiving SSI or CalWORKS.
- The difference in the count of individuals included on applications versus the count of individuals eligible, in-part, also reflects individuals ineligible for coverage through California's insurance affordability programs.

APPLICATIONS RECEIVED

Data Sources and Methods

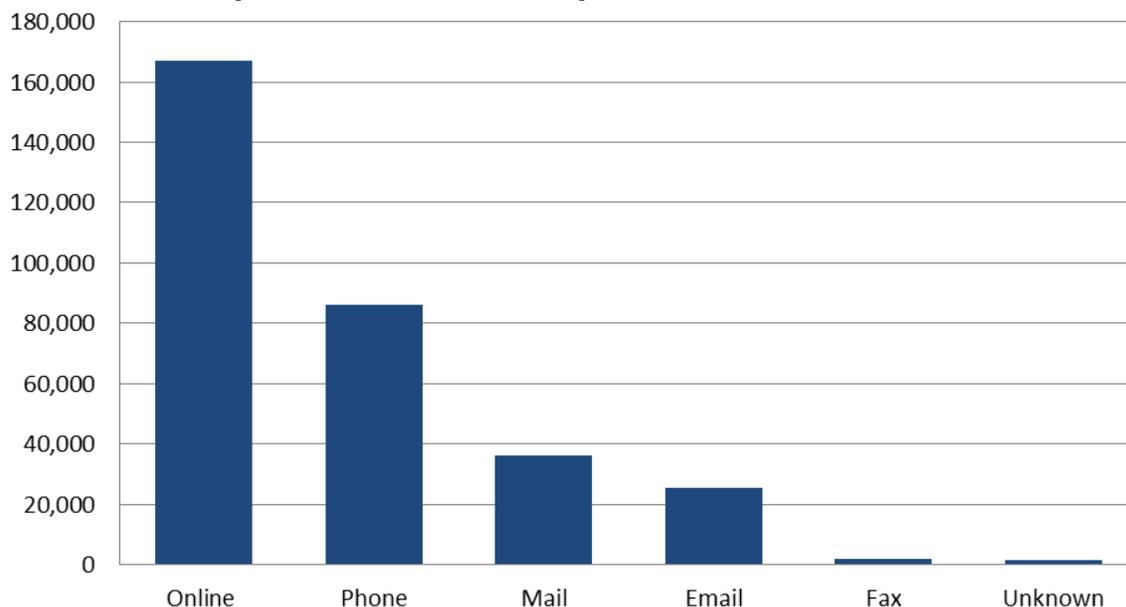
Data on application volume and submission channel include all applications received for Medi-Cal or QHP during the reporting period of April – September 2015. Applications through CalHEERS include those submitted online, or by phone, mail, e-mail or fax. Applications to County Human Services Agency offices include those initiated through www.benefitscal.com, phone, mail/fax, in-person, outreach efforts, e.g., eligibility workers stationed outside of county offices, other programs (including e-mail, Community Based Organizations, In-Home Supportive Services, and call centers maintained by SAWS consortia), and unknown source cases where the relevant data field was not populated. Application volume and submission channel data do not include individuals automatically eligible for Medi-Cal as a result of their receipt of CalWORKs or eligibility determination for SSI.

Applicants through Express Lane, an expedited enrollment process for beneficiaries in CalFresh, and those transitioning from APTC to Medi-Cal, and HPE are tabulated separately for this reporting period. These policies became effective in January 2014. Data on applications through Express Lane in the first quarter of 2015 were tabulated differently from data presented for this reporting period, and the enrollment numbers reported on the prior report should not be directly compared to the numbers reflected on this report. The methodology was also adjusted for this reporting period to include data on individuals terminating QHP in APTC and transitioning as newly eligible for Medi-Cal.

Applications could be filed independently or with assistance. *Agents* are licensed insurance agents, brokers, or web brokers, trained and certified by Covered California, to sell products in the individual marketplace. *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.

APPLICATIONS RECEIVED

Applications Received Through CalHEERS by Submission Channel April 1, 2015 – September 30, 2015



Source: CalHEERS

Note: Applicants may choose to use more than one submission channel to complete their applications.

- The number of applications received through CalHEERS in this period decreased by 40 percent, relative to the first quarter of 2015, likely because that reporting period included the peak activity of Covered California's 2015 open enrollment period, which finished by the time this period began.
- About 53 percent of all applications received through CalHEERS during April – September 2015, were initiated online, including those filed with and without assistance.
- The share of applications initiated online (53 percent) is about the same as it was in the previous reporting period (51 percent).

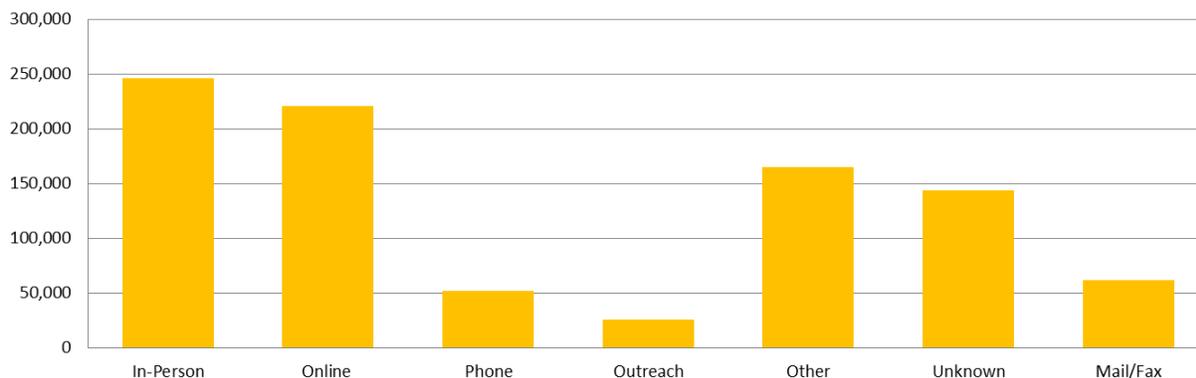
Submission Channel	Reporting Period: April – September 2015		Prior Reporting Period: January – March 2015	
	Number of Applications	Percent of Applications	Number of Applications	Percent of Applications
Online	167,034	53	267,150	51
Phone	86,184	27	160,133	31
Mail	36,143	11	50,499	10
Email	25,255	8	42,959	8
Fax	1,680	1	2,253	<1
Unknown	1,508	<1	N/A	N/A
Total	317,804	N/A	522,994	N/A

[Applications](#) → [Applicants](#) → [Eligibility Determination](#) → [Enrollment](#) → [Renewal](#)

APPLICATIONS RECEIVED

Applications Received Through County Human Services Agency Offices by Submission Channel

April 1, 2015 – September 30, 2015



Source: SAWS

Note: Applicants may choose to use more than one submission channel to complete their application. Please see data source on page 8 for additional explanation of the submission categories.

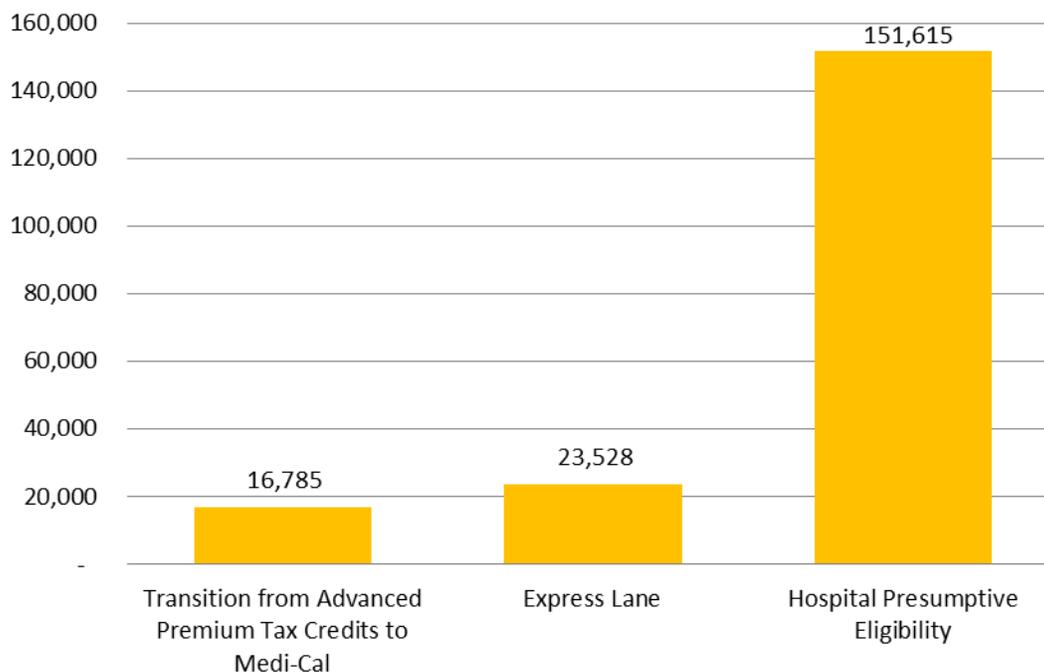
- Of applications received through County Human Services Agency offices, the largest share were initiated through in-person applications (27 percent), followed by online applications through www.benefitscal.com (24 percent). Applications submitted through outreach channels decreased by 7 percent in this reporting period.
- In addition to applications through CalHEERS and County Human Services Agency offices, applications through hospitals continued to be an important entry point for coverage.

Submission Channel	Reporting Period: April - September 2015		Prior Reporting Period: January - March 2015	
	Number of Applications	Percent of Applications ⁷	Number of Applications	Percent of Applications
In-Person	246,190	27	224,573	26
Online (BenefitsCal.com)	220,397	24	243,760	28
Phone	51,990	6	101,744	12
Outreach	25,728	3	89,829	10
Other	164,595	18	85,853	10
Unknown	143,275	16	76,704	9
Mail/Fax	61,832	7	57,092	6
Total	914,007	N/A	879,555	N/A

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

APPLICATIONS RECEIVED

Medi-Cal Applications Processed Through Other Eligibility Pathways April 1, 2015 – September 30, 2015



Source: MEDS

- Approximately 192,000 individuals became newly eligible to Medi-Cal through alternative channels intended to expedite enrollment.
- The share of applications submitted via Hospital Presumptive Eligibility for this reporting period was 10 percent; double that of the prior reporting period of 5 percent.

Pathway	Reporting Period:	Prior Reporting Period:
	April –September 2015	January – March 2015
	Number of Applications	Number of Applications
Transition from APTC to Medi-Cal	16,785	36,392
Express Lane ⁸	23,528	60,798
HPE	151,615	81,304

⁸ Data on the number of Express Lane applications during January 2015 – March 2015 were tabulated differently in that report. Since the publishing of the prior report, the methodology in establishing Express Lane data has been refined and corrected for this report. See pg.9 for additional details. See page 48 for January 2015 – March 2015 report period errata details.

APPLICATIONS RECEIVED

Applications Filed with the Help of an Assister or Navigator

- Approximately 83 percent of applications determined eligible for QHPs were filed with the help of an Agent (43 percent), Service Center Representative (17 percent), CEC (7 percent), County Eligibility Worker (1 percent), or Plan-Based Enroller (2 percent). This is an increase from the previous reporting period of January – March 2015, in which 71 percent of applications determined eligible for QHPs were filed with help.
- Roughly 4 percent of applications determined eligible for Medi-Cal were filed with the help of an Agent or CEC, a decrease from the prior reporting period (10 percent).
- All applications for coverage received through the County Human Services Agency offices are handled by a County Eligibility Worker.

INDIVIDUALS INCLUDED ON APPLICATIONS AND APPLICANT DEMOGRAPHICS

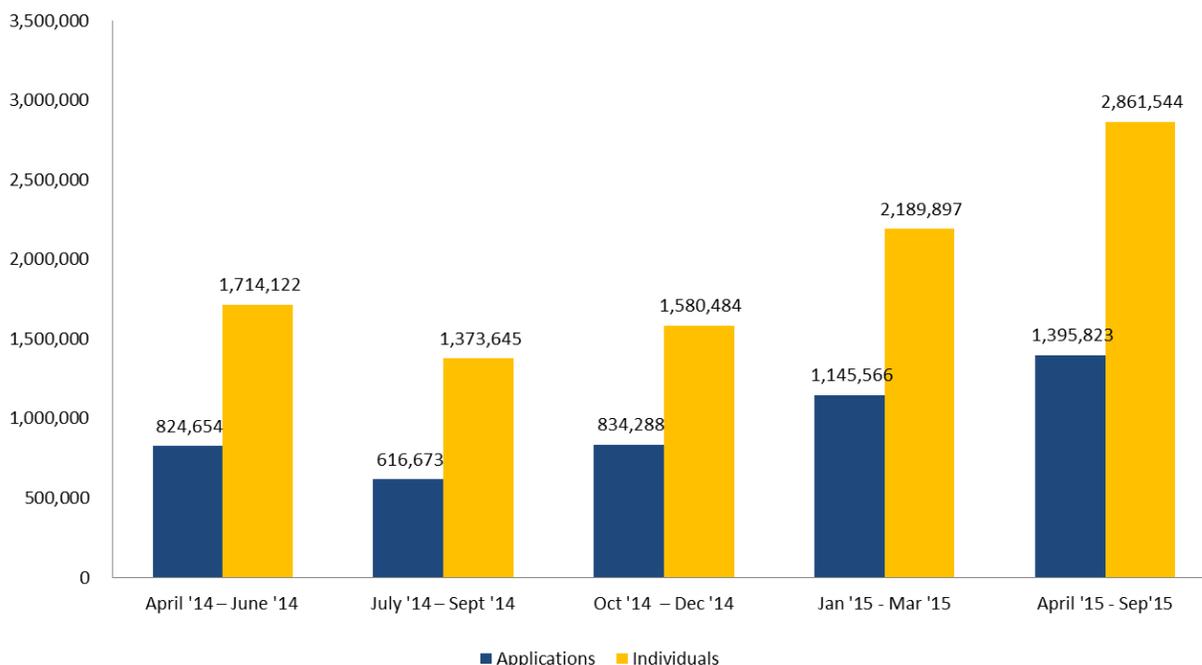
Data Sources and Methods

Demographic data (age, gender, race, ethnicity, and language preferences) include all applicants for Medi-Cal or QHP, processed through CalHEERS, during the reporting period of April – September 2015. No race, ethnicity, or language categories available in CalHEERS have been omitted or aggregated. Comparable demographic data on individuals, who applied for non-MAGI Medi-Cal⁹, or through Express Lane, APTC to Medi-Cal, and HPE, are not currently available but efforts are underway to research the feasibility of gathering this data for future reporting periods.

⁹ Some applicants may be eligible for Medi-Cal on the basis of their household income and assets, as well as other characteristics, such as their age or disability status. The eligibility determination based on this combination of income and other criteria is commonly referred to as non-MAGI Medi-Cal eligibility.

INDIVIDUALS INCLUDED ON APPLICATIONS

Number of Applications and Individuals Included on Applications April 1, 2015 – September 30, 2015



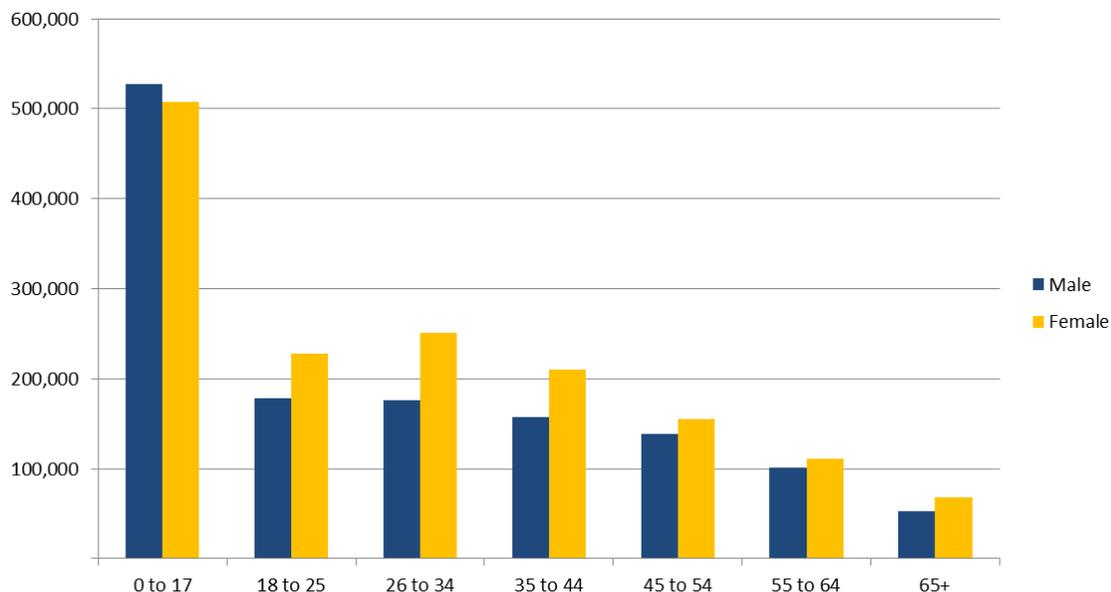
Source: CalHEERS

- The 1,395,823 total applications received through CalHEERS (a subset of top blue box, page 8) from April 1, 2015–September 30, 2015, represent 497,308 individuals who submitted applications directly to CalHEERS (via available submission channels depicted on page 10), in addition to 2,364,236 individuals who submitted applications through SAWS submission channels (depicted on page 11), for a total of 2,861,544 individuals included on applications (which excludes Express Lane, Hospital PE, MCAP, and APTC to Medi-Cal applications).
- Roughly 250,000 fewer applications were submitted April – September 2015, as compared to January 2015 – March 2015.
- The most recent Covered California Open Enrollment period ended on February 15, 2015, before the current reporting period. As a result, applications during this reporting period reflected 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.

Applications → Applicants → Eligibility Determination → Enrollment → Renewal

APPLICANT DEMOGRAPHICS (GENDER, AGE)

Age and Gender of Applicants April 1, 2015 – September 30, 2015



Source: CalHEERS

Note: Individuals may be included more than once if they submitted multiple applications.

- 1,034,917 children (ages 0 to 17) and 405,921 young adults (ages 18 to 25) applied for health insurance through CalHEERS.
- Children continue to represent the largest share of applicants received through CalHEERS during this and the prior reporting period (January – March 2015).

Age, Gender	These Quarters: April – September 2015		Prior Reporting Period: January – April 2015	
	Number of Individuals	Percent of Individuals ¹⁰	Number of Individuals	Percent of Individuals
0 to 17	1,034,917	36	693,928	32
18 to 25	405,921	14	329,277	15
26 to 34	426,930	15	363,952	17
35-44	368,034	13	285,363	13
45 to 54	293,080	10	266,531	12
55 to 64	212,254	7	194,446	9
65+	120,406	4	56,400	3
Male	1,330,055	46	1,051,520	48
Female	1,531,487	54	1,138,377	52

¹⁰ The Percent of Individuals are rounded to nearest whole number.

Applications → Applicants → Eligibility Determination → Enrollment → Renewal

APPLICANT DEMOGRAPHICS (RACE)

Race of Applicants Included on Applications (of Those Who Reported Race) April 1, 2015 – September 30, 2015

Race	Reporting Period: April – September 2015		Prior Reporting Period: January – March 2015	
	Number of Individual Applicants By Race	Percent of Individual Applicants By Race	Number of Individual Applicants By Race	Percent of Individual Applicants By Race
White	696,112	52	550,289	51
Black or African American	190,133	14	123,905	11
Other	150,106	11	146,597	14
Vietnamese	69,519	5	38,611	4
Chinese	57,790	4	43,061	4
Filipino	53,682	4	43,456	4
Mixed Race	30,956	2	50,050	5
Other Asian	29,823	2	22,005	2
Asian Indian	23,445	2	17,269	2
Korean	17,142	1	19,899	2
American Indian and/or Alaska Native	14,793	1	11,499	1
Other Pacific Islander	5,160	<1	4,011	<1
Samoan	4,625	<1	2,816	<1
Japanese	3,807	<1	3,636	<1
Native Hawaiian	3,227	<1	1,898	<1
Guamanian or Chamorro	1,296	<1	1,003	<1
Not Reported	1,509,928	N/A	1,109,892	N/A
Total	2,861,544	N/A	2,189,897	N/A

Source: CalHEERS

Note: Individuals may be included more than once, if they submitted multiple applications.

- Nearly half of applicants received through CalHEERS indicated their race, and the distribution of racial groups was similar to prior reporting period. Applicants are not required to indicate race.

APPLICANT DEMOGRAPHICS (ETHNICITY)

Ethnicity of Applicants Included on Applications (of Those Who Reported an Ethnicity) April 1, 2015 – September 30, 2015

Ethnicity	Reporting Period: April - September 2015		Prior Reporting Period: January – March 2015	
	Number of Individual Applicants by Ethnicity	Percent of Individual Applicants by Ethnicity	Number of Individual Applicants by Ethnicity	Percent of Individual Applicants by Ethnicity
Hispanic – ethnic origin reported	362,049	13	378,389	19
Mexican/Mexican American/Chicano	308,099	85	320,990	85
Puerto Rican	3,596	13	45,455	12
Mixed Ethnicity	2,658	1	6,168	2
Other	46,126	1	4,092	1
Cuban	1,570	<1	1,684	<1
Hispanic – ethnic origin not reported	1,196,307	42	703,136	36
Not Hispanic	1,218,346	43	897,100	45
Ethnicity not reported	84,842	N/A	211,272	N/A
Total	2,861,544	N/A	2,189,897	N/A

Source: CalHEERS

Note: Individuals may be included more than once, if they submitted multiple applications. 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.

- Approximately 97 percent of applicants reported their ethnicity, as compared to 90 percent in the prior reporting period. Among those, who reported being Hispanic, 23 percent reported their specific ethnic origin. Applicants are not required to indicate their ethnicity or ethnic origin.
- 56 percent of those reporting their ethnicity in these two quarters of 2015 identified as Hispanic, similar to 55 percent in the prior reporting period.

APPLICANT DEMOGRAPHICS (WRITTEN LANGUAGE)

Primary Written Language of Applicants Included on Applications (of Those Who Reported a Primary Written Language) April 1, 2015 –September 30, 2015

Primary Language	Reporting Period: April – September 2015		Prior Reporting Period: January – March 2015	
	Number of Applicants by Language	Percent of Applicants by Language	Number of Applicants by Language	Percent of Applicants by Language
English	1,567,468	69	1,298,625	72
Spanish	656,149	29	468,424	26
Vietnamese	24,546	1	11,630	1
Traditional Chinese character	18,064	<1	15,233	1
Korean	6,092	<1	8,520	<1
Tagalog	2,770	<1	1,722	<1
Armenian	2,444	<1	1,534	<1
Arabic	2,364	<1	1,623	<1
Russian	2,322	<1	1,757	<1
Farsi	2,080	<1	1,470	<1
Cambodian	896	<1	529	<1
Hmong	848	<1	681	<1
Other	<20	<1		
Not Reported	575,485	N/A	378,149	N/A
Total	2,861,544	N/A	2,189,897	N/A

Source: CalHEERS

Note: Individuals may be included more than once, if they submitted multiple applications. These categories have been combined to protect the privacy of the small number of individuals in each group.

- The share of applicants received through CalHEERS, whose primary written language was Spanish (29 percent) and English (69 percent), remained similar to the previous reporting period.

APPLICANT DEMOGRAPHICS (SPOKEN LANGUAGE)

Primary Spoken Language of Applicants Included on Applications (of Those Who Reported a Primary Spoken Language) April 1, 2015 –September 30, 2015

Primary Language	Reporting Period: April – September 2015		Prior Reporting Period: January – March 2015	
	Number of Applicants by Language	Percent of Applicants by Language	Number of Applicants by Language	Percent of Applicants by Language
English	1,820,506	65	1,449,922	68
Spanish	874,678	31	591,924	28
Vietnamese	47,201	2	22,836	1
Cantonese	22,050	1	13,983	1
Mandarin	14230	1	14,554	1
Korean	7712	<1	9,659	<1
Arabic	8063	<1	4,957	<1
Tagalog	7468	<1	4,725	<1
Russian	6075	<1	4,290	<1
Hmong	5384	<1	3,924	<1
Farsi	4700	<1	3,075	<1
Armenian	4384	<1	2,799	<1
Cambodian	1,935	<1	1,223	<1
Not Reported	37,158	N/A	62,026	N/A
Total	2,861,544	N/A	2,189,897	N/A

Source: CalHEERS

Note: Individuals may be included more than once, if they submitted multiple applications.

- The share of applicants received through CalHEERS, whose primary spoken language was Spanish (31 percent), is about the same as the previous reporting period (28 percent). The share of applicants, whose primary spoken language was English (65 percent), is slightly lower than the previous reporting period (68 percent).

ELIGIBLE INDIVIDUALS

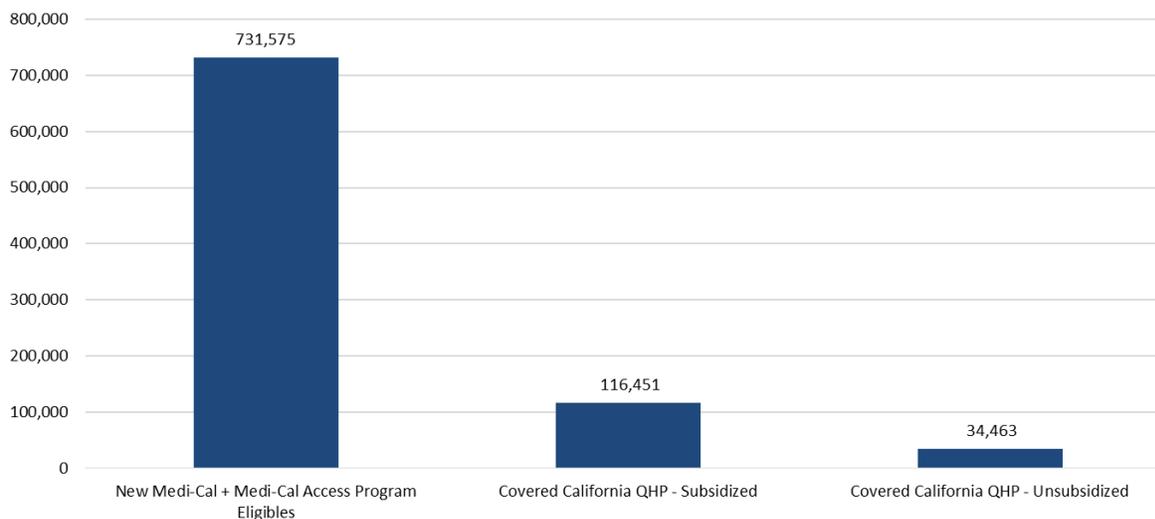
Data Sources and Methods

Data on Medi-Cal eligible individuals are a subset of the individuals on applications included in this report. They include individuals, who applied through CalHEERS, directly to County Human Services Agency offices, through Express Lane Eligibility, or through HPE and were determined eligible. Eligibility data include individuals, who became eligible for Medi-Cal automatically as a result of their receipt of CalWORKs or eligibility determination for SSI. New Medi-Cal eligibles are defined as individuals not enrolled during the previous quarter.

Demographic data are presented in this section for individuals, who selected a QHP. This is a subset of the individuals assessed eligible for QHP during the period. QHP applicants are not fully enrolled until they submit their first premium payment. Subsidized QHP coverage includes QHP enrollments with APTC and/or cost-sharing reductions.

ELIGIBLE INDIVIDUALS

Distribution of Eligible Individuals Across Insurance Affordability Programs April 1, 2015 – September 30, 2015



Source: CalHEERS, MEDS and Health Care Options

Note: New Medi-Cal eligibles are defined as individuals not enrolled during the previous quarter. During the reporting period, 1,316 individuals were determined eligible for MCAP. "Eligible individuals" refers to eligible individuals, who selected a QHP.

- Overall, 87 percent of eligible individuals qualified for Medi-Cal, MCAP or subsidized QHPs; the same percentage as the previous reporting period. The remaining 13 percent qualified for unsubsidized QHPs.
- 77 percent of individuals determined eligible for QHPs and selected a plan qualified for subsidies is a smaller share than the 88 percent eligible for subsidies in the previous reporting period.

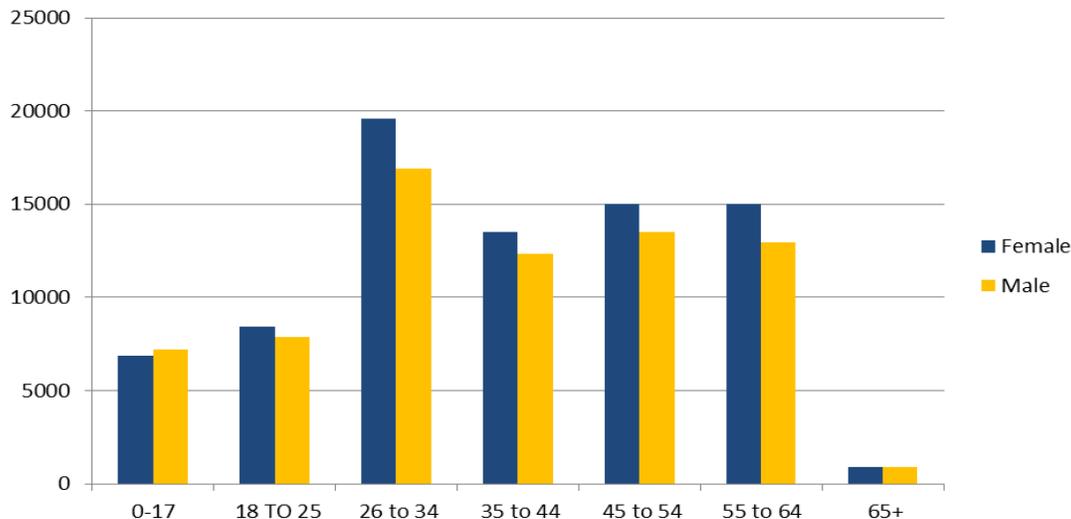
Program Eligibility	Reporting Period: April – September 2015		Prior Reporting Period: January – March 2015	
	Number of Eligible Individuals	Percent of Eligible Individuals	Number of Eligible Individuals	Percent of Eligible Individuals
Medi-Cal Eligibles	729,005	83	909,075	73
MCAP Eligibles	2,570	<1	1,859	<1
Covered California QHP - Subsidized	116,451	4	298,979	24
Covered California QHP -Unsubsidized	34,463	13	42,360	3
Total	882,489	N/A	1,252,273	N/A

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

Applications → Applicants → Eligibility Determination → Enrollment → Renewal

DEMOGRAPHICS OF ELIGIBLE INDIVIDUALS (GENDER, AGE)

Age and Gender of Eligible Individuals Selecting a QHP April 1, 2015 – September, 2015



Source: CalHEERS

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

- Nearly 14,000 children and youth (ages 0 to 17) and about 16,000 young adults (ages 18 to 25) were determined eligible for QHP and selected a plan in the reporting period.
- Among individuals, who selected a QHP, the largest shares were ages 26 to 34.

Age, Gender	Reporting Period: April– September 2015		Prior Reporting Period: January – March 2015	
	Number of Eligible Individuals	Percent of Eligible Individuals ¹¹	Number of Eligible Individuals	Percent of Eligible Individuals
0 to 17	14,056	9	18,229	5
18 to 25	16,255	11	45,170	13
26 to 34	36,496	24	73,163	21
35 to 44	25,834	17	58,630	17
45 to 54	28,512	19	78,031	23
55 to 64	27,955	19	65,814	19
65+	1,793	1	2,302	1
Male	71,673	53	172,631	51
Female	79,228	47	168,708	49

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

¹¹ The Percentage of Eligible Individuals is rounded to nearest whole number.

DEMOGRAPHICS OF ELIGIBLE INDIVIDUALS (RACE)

Race of Eligible Individuals Selecting a QHP (of Those Who Reported Race) April 1, 2015 – September 30, 2015

Race	Reporting Period: April – September 2015		Prior Reporting Period: January – March 2015	
	Number of Eligible Individuals by Race	Percent of Eligible Individuals by Race	Number of Eligible Individuals by Race	Percent of Eligible Individuals by Race
White	46,717	56	91,396	52
Other	8,752	10	25,418	14
Chinese	6,170	7	11,035	6
Mixed Race	3,756	4	9,211	5
Black or African American	3,450	4	8,631	5
Filipino	3,328	4	7,837	4
Vietnamese	3,094	4	4,744	3
Korean	2,819	3	7,378	4
Asian Indian	2,542	3	3,920	2
Other Asian	1,449	2	3,398	2
American Indian and/or Alaska Native	650	1	1,479	1
Japanese	600	1	1,138	1
Other Pacific Islander	182	<1	478	<1
Samoan	59	<1	115	<1
Guamanian or Chamorro	42	<1	129	<1
Native Hawaiian	29	<1	75	<1
Not Reported	67,275	N/A	164,957	N/A
Total	150,914	N/A	341,339	N/A

Source: CalHEERS

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

- About 55 percent of eligible individuals, who selected a QHP, indicated their race. Applicants are not required to indicate their race.
- The racial distribution of eligible individuals, who selected a QHP, was comparable to the racial distribution across all individuals, who applied through CalHEERS, including those found eligible for Medi-Cal.

DEMOGRAPHICS OF ELIGIBLE INDIVIDUALS (ETHNICITY)

Ethnicity of Eligible Individuals Selecting a QHP (of Those Who Reported an Ethnicity) April 1, 2015 – September 30, 2015

Ethnicity	Reporting Period: April – September 2015		Prior Reporting Period: January – March 2015	
	Number of Eligible Individuals by Ethnicity	Percent of Eligible Individuals by Ethnicity	Number of Eligible Individuals by Ethnicity	Percent of Eligible Individuals by Ethnicity
Hispanic – ethnic origin reported	21,395	14	72,267	32
Mexican/Mexican American/Chicano	16,535	77	59,205	82
Other	3,927	18	837	15
Mixed Ethnicity	403	2	1,138	2
Puerto Rican	332	2	10,655	1
Cuban	198	1	432	1
Hispanic – ethnic origin not reported	3,867	3	10,190	5
Not Hispanic	77,260	51	141,318	63
Ethnicity not reported	48,392	N/A	117,564	N/A
Total	150,914	N/A	341,339	N/A

Source: CalHEERS

Note: 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.

- A total of 102,522 eligible individuals, who selected QHPs (68 percent), reported their ethnicity. Of those individuals about 25 percent identified as Hispanic. Among all applicants through CalHEERS, in the reporting period, including those found eligible for Medi-Cal, 56 percent identified as Hispanic.
- Among eligible individuals, who selected a QHP and reported being Hispanic, 85 percent reported their specific ethnic origin. Eligible individuals are not required to indicate their ethnicity or ethnic origin.

DEMOGRAPHICS OF ELIGIBLE INDIVIDUALS (WRITTEN LANGUAGE)

Primary Written Language of Eligible Individuals Selecting a QHP (of Those Who Reported a Primary Written Language) April 1, 2015 – September 30, 2015

Primary Written Language	Reporting Period: April – September 2015		Prior Reporting Period: January – March 2015	
	Number of Eligible Individuals by Language	Percent of Eligible Individuals by Language	Number of Eligible Individuals by Language	Percent of Eligible Individuals by Language
English	118,560	88	251,133	81
Spanish	10,363	8	47,006	15
Traditional Chinese character	2,907	2	6,129	2
Korean	1,382	1	3,963	1
Vietnamese	870	1	1,298	<1
Farsi	81	<1	116	<1
Russian	80	<1	211	<1
Tagalog	60	<1	233	<1
Arabic	36	<1	79	<1
Cambodian	23	<1	40	<1
Armenian	<20	<1	61	<1
Other	<20	<1	<20	<1
Not Reported	16,528	N/A	31,064	N/A
Total	150,914	N/A	341,339	N/A

Source: CalHEERS

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

These categories have been combined to protect the privacy of the small number of individuals in each group.

- A majority of eligible individuals, who selected QHPs, indicated English as their primary written language (88 percent), with notable groups preferring written communication in Spanish (8 percent) or traditional Chinese characters (2 percent).
- English language preference was more prevalent among eligible individuals, who selected a QHP, as compared to the overall pool of applicants received through CalHEERS. Across all applicants through CalHEERS in the reporting period (pg.17), including those found eligible for Medi-Cal, 69 percent preferred English and 29 percent preferred Spanish for written communication.

DEMOGRAPHICS OF ELIGIBLE INDIVIDUALS (SPOKEN LANGUAGE)

Primary Spoken Language of Eligible Individuals Selecting a QHP (of Those Who Reported a Primary Spoken Language) April 1, 2015 – September 30, 2015

Primary Spoken Language	Reporting Period: April – September 2015		Prior Reporting Period: January – March 2015	
	Number of Eligible Individuals by Language	Percent of Eligible Individuals by Language	Number of Eligible Individuals by Language	Percent of Eligible Individuals by Language
English	118,517	87	249,322	80
Spanish	10,829	8	48,365	15
Mandarin	2,115	2	4,837	2
Korean	1,449	1	4,142	1
Cantonese	1,423	1	2,463	1
Vietnamese	1,097	1	1,649	1
Tagalog	143	<1	466	<1
Russian	111	<1	308	<1
Farsi	102	<1	164	<1
Arabic	68	<1	146	<1
Cambodian	36	<1	94	<1
Armenian	34	<1	98	<1
Hmong	<20	<1	29	<1
Not Reported	14,982	N/A	29,256	N/A
Total	150,914	N/A	341,339	N/A

Source: CalHEERS

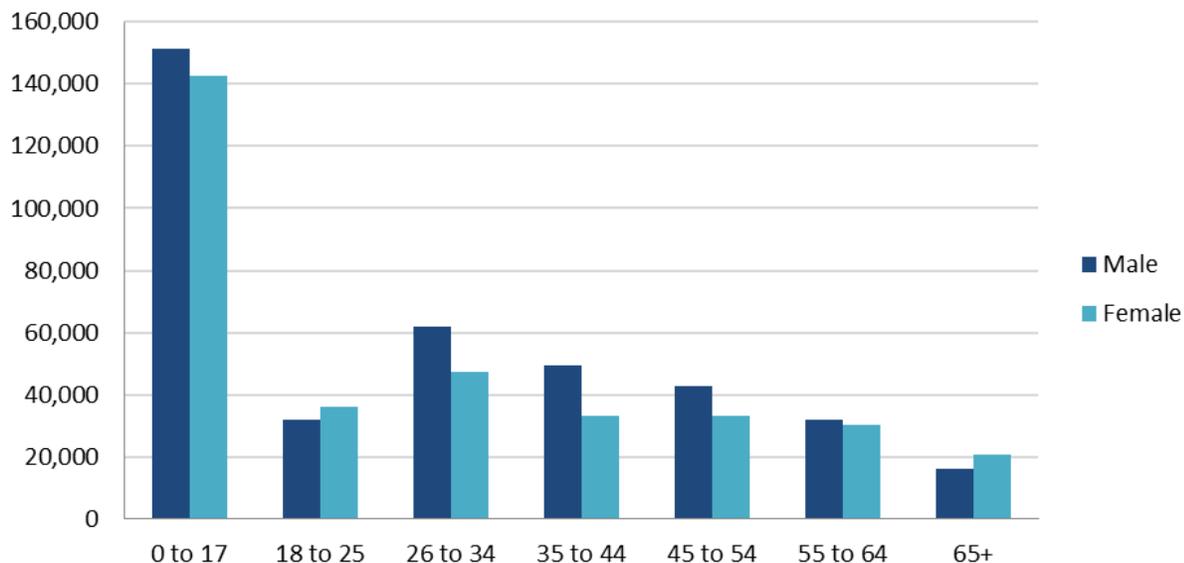
Note: "Eligible individuals," refers to eligible individuals, also selected a QHP.

These categories have been combined to protect the privacy of the small number of individuals in each group.

- A majority of eligible individuals, who selected QHPs, indicated English as their primary spoken language (87 percent), with notable minorities preferring Spanish (8 percent) or Mandarin (2 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. Across all applicants through CalHEERS in the reporting period, including those found eligible for Medi-Cal, 64 percent preferred English and 31 percent preferred Spanish for spoken communication.

DEMOGRAPHICS OF ELIGIBLE INDIVIDUALS (GENDER, AGE)

Age and Gender of Individuals Eligible for Medi-Cal April 1, 2015 – September 30, 2015



Source: MEDS

- Approximately 294,000 children and youth (ages 0 to 17) and about 68,000 young adults (ages 18 to 25) were determined eligible for Medi-Cal coverage.

Age, Gender	Reporting Period: April – September 2015		Prior Reporting Period: January – March 2015	
	Number of Eligible Individuals	Percent of Eligible Individuals ¹²	Number of Eligible Individuals	Percent of Eligible Individuals
0 to 17	293,896	40	260,893	29
18 to 25	67,965	9	160,495	18
26 to 34	109,278	15	162,671	18
35 to 44	82,827	11	115,952	13
45 to 54	76,098	10	108,743	12
55 to 64	62,076	9	77,881	9
65+	36,865	5	22,417	2
Male	385,390	53	453,260	50
Female	343,615	47	455,815	50

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

¹² The Percentage of Eligible Individuals is rounded to nearest whole number.

DEMOGRAPHICS OF ELIGIBLE INDIVIDUALS (RACE/ETHNICITY)

Race/Ethnicity of Individuals (Of Those Who Reported Race/Ethnicity) Eligible for Medi-Cal April 1, 2015 – September 30, 2015

Race	Reporting Period: April – September 2015		Prior Reporting Period: January – March 2015	
	Number of Eligible Individuals by Race	Percent of Eligible Individuals by Race	Number of Eligible Individuals by Race	Percent of Eligible Individuals by Race
Hispanic	212,917	39	358,028	45
White	146,335	27	200,108	25
Black	38,393	7	51,114	6
Other	47,347	9	58,674	7
Other Asian or Pacific Islander	34,680	6	41,020	5
Filipino	16,765	3	19,941	3
Chinese	17,347	3	19,630	2
Vietnamese	10,917	2	13,446	2
Asian Indian	7,466	1	7,961	1
Korean	5,585	1	7,315	1
Alaskan Native or American Indian	2,448	<1	3,554	<1
Cambodian	997	<1	1,483	<1
Samoaan	896	<1	1,198	<1
Laotian	768	<1	1,072	<1
Japanese	1,273	<1	1,835	<1
Hawaiian	576	<1	654	<1
Guamanian	328	<1	394	<1
Armenian	99	<1	107	<1
Unknown	4,237	N/A	4,299	N/A
Not Reported	179,631	N/A	117,242	N/A
Total	729,005	N/A	909,075	N/A

Source: MEDS

- MEDS, the system of record for Medi-Cal, captures race and ethnicity data in a single field. About 545,000 individuals determined eligible for Medi-Cal during April – September 2015 indicated their race/ethnicity. Of these individuals, 39 percent were Hispanic, 27 percent were White, and 7 percent were Black. Among all applicants through CalHEERS, including those found eligible for QHPs, 56 percent identified as Hispanic.

DEMOGRAPHICS OF ELIGIBLE INDIVIDUALS (LANGUAGE)

Primary Language of Individuals (Of Those Who Reported a Primary Language) Eligible for Medi-Cal April 1, 2015 – September 30, 2015

Primary Language	Reporting Period: April – September 2015		Prior Reporting Period: January – March 2015	
	Number of Eligible Individuals by Language	Percent of Eligible Individuals by Language	Number of Eligible Individuals by Language	Percent of Eligible Individuals by Language
English	475,633	65	620,406	69
Spanish	196,942	30	236,824	26
Vietnamese	7,594	1	7,641	1
Mandarin	6,923	1	6,889	1
Cantonese	5,939	1	6,005	1
Other Non-English	3,727	<1	2,402	<1
Arabic	3,353	<1	2,269	<1
Korean	3,063	<1	4,021	<1
Armenian	2,729	<1	1,752	<1
Tagalog	2,683	<1	2,569	<1
Farsi	2,391	<1	1,779	<1
Russian	2,166	<1	1,906	<1
Other Chinese Languages	1,032	<1	930	<1
Hmong	560	<1	759	<1
Cambodian	380	<1	511	<1
Portuguese	242	<1	152	<1
Lao	201	<1	251	<1
Thai	136	<1	98	<1
French	129	<1	110	<1
Japanese	124	<1	100	<1
Samoan	123	<1	128	<1
American Sign Language (ASL)	92	<1	70	<1
Turkish	52	<1	28	<1
Other Sign Language	46	<1	40	<1
Hebrew	31	<1	29	<1
Ilocano	25	<1	25	<1
Mien	21	<1	47	<1
Other Primary Languages	<20	<1	38	<1
Unknown	4,639	N/A	9,014	N/A
Not Reported	7,994	N/A	2,282	N/A
Total	729,005	N/A	909,075	N/A

Source: MEDS

Note: . These categories have been combined to protect the privacy of the small number of individuals in each group.

HEALTH PLAN ENROLLMENT

Data Sources and Methods

Plan selection data are presented for individuals eligible for QHPs through Covered California. Open enrollment for 2015 ended on February 15, 2015; new plan selections during the reporting period were the result of qualifying life events as a special enrollment period. QHP applicants are not fully enrolled until they submit their first premium payment. On page 35, “Minimum Coverage,” under Unsubsidized Coverage refers to subsidy-eligible individuals, who select minimum coverage plans, and therefore forgo their subsidies. In prior reports, this group was combined with individuals, not eligible for subsidies and chose minimum coverage plans.

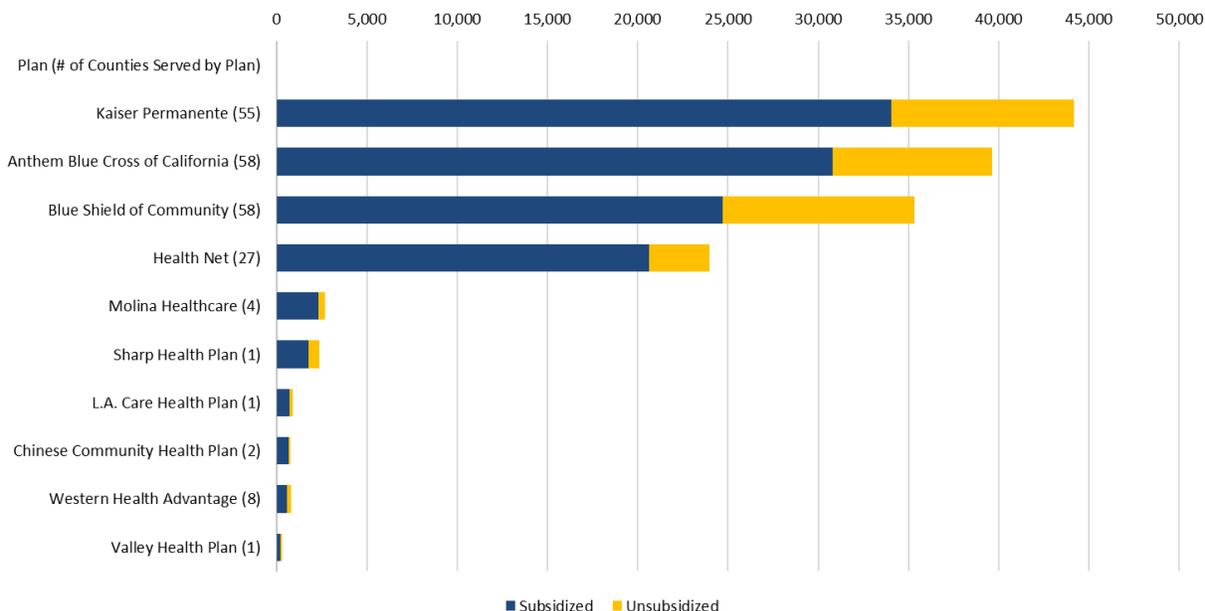
Medi-Cal beneficiaries are enrolled in either a contracted MCP or in FFS Medi-Cal. Beneficiaries in 35 counties have a choice between two or more MCPs.¹³ Beneficiaries in one county have the choice of a MCP or FFS. For beneficiaries in these counties, who do not select their MCP within 30–45 days, and 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. Enrollment data for new enrollees in County Organized Health Systems (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 22 COHS do not have other health plans from which to choose. Federal regulation limits the collective maximum beneficiary enrollment in COHS plans to 10 percent of the Medi-Cal population.

In addition to beneficiaries enrolled in MCPs, and those enrolled in COHS, more than 354,000 Medi-Cal beneficiaries were covered under FFS during the reporting period.

¹³ See a description of Medi-Cal’s managed care models here - <http://www.dhcs.ca.gov/provgovpart/Documents/MMCDModelFactSheet.pdf>

HEALTH PLAN ENROLLMENT (COVERED CALIFORNIA HEALTH PLANS)

QHPs Selected by Covered California Enrollees April 1, 2015 – September 30, 2015



Source: CalHEERS

Note: This figure represents 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 first quarter of 2015.
- Kaiser Permanente and Anthem Blue Cross of California continued to be the most frequently selected QHPs.
- Generally, individuals with and without subsidy eligibility made similar health plan selections.

HEALTH PLAN ENROLLMENT (COVERED CALIFORNIA HEALTH PLANS)

QHPs Selected by Covered California Enrollees April 1, 2015 – September 30, 2015

Health Plan (Number of Counties)	Reporting Period: April – September 2015		Prior Reporting Period: January – March 2015	
	Number of Eligible Individuals	Number of Eligible Individuals ¹⁴	Number of Eligible Individuals	Percent of Eligible Individuals
Kaiser Permanente (55)	44,169	29	95,602	28
Anthem Blue Cross of California (58)	39,632	26	96,909	28
Blue Shield of Community (58)	35,336	23	58,322	17
Health Net (27)	23,973	16	67,946	20
Molina Healthcare (4)	2,668	2	10,661	3
Sharp Health Plan (1)	2,378	2	4,842	1
L.A. Care Health Plan (1)	887	1	3,052	1
Western Health Advantage (8)	804	1	1,637	<1
Chinese Community Health Plan (2)	778	1	1,740	1
Valley Health Plan (1)	289	<1	628	<1
Total	150,914	N/A	341,339	N/A

Source: CalHEERS

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

¹⁴ The percent of Eligible Individuals are rounded to nearest whole number

HEALTH PLAN ENROLLMENT (COVERED CALIFORNIA HEALTH PLANS)

**Covered California QHP Enrollment by Rating Region
April 1, 2015 – September 30, 2015**



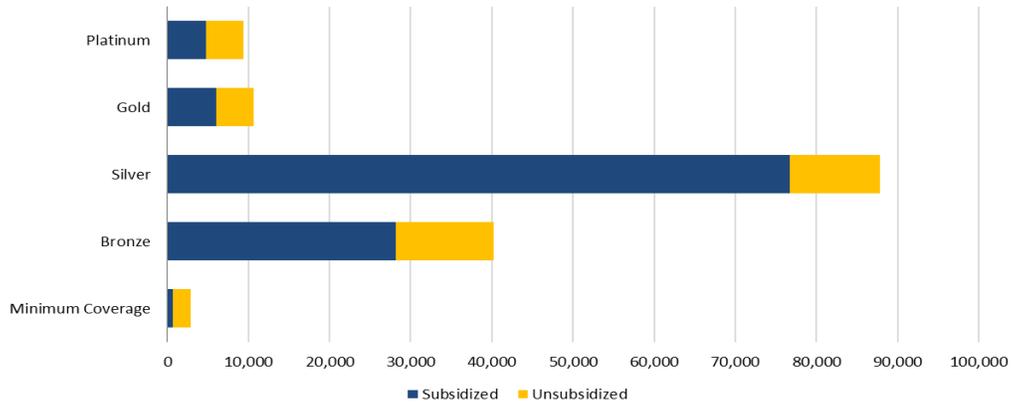
Source: CalHEERS

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>.

Applications → Applicants → Eligibility Determination → Enrollment → Renewal

HEALTH PLAN ENROLLMENT (COVERED CALIFORNIA)

Covered California QHP Enrollment by Metal Tier, April 1, 2015 – September 30, 2015



Source: CalHEERS

- Silver plans remained the most frequently selected among subsidized enrollees. One-quarter selected bronze plans (24 percent), a decrease from the last reporting period (31 percent).
- Among unsubsidized enrollees, bronze plans continued to be the most frequently selected (35 percent). More eligible individuals selected gold or platinum plans (26 percent) and fewer individuals selected minimum coverage (6 percent) as compared to the prior reporting period.

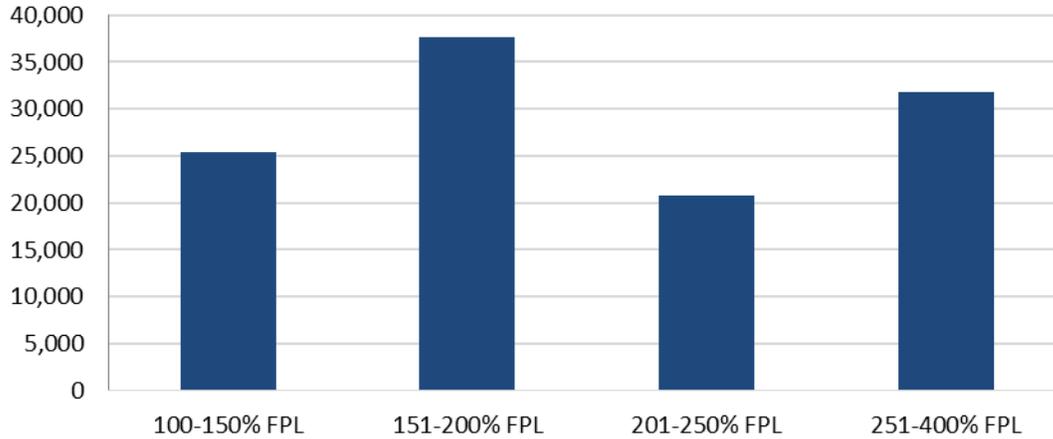
Program Eligibility	Reporting Period: April – September 2015		Prior Reporting Period: January – March 2015	
	Number of Eligible Individuals	Percent of Eligible Individuals	Number of Eligible Individuals	Percent of Eligible Individuals
Subsidized Coverage				
Platinum	4,792	4	7,972	3
Gold	6,009	5	10,961	4
Silver	76,747	66	186,242	62
Bronze	28,219	24	93,804	31
Minimum Coverage	684	1	N/A	N/A
Total	116,451	N/A	298,979	N/A
Unsubsidized Coverage				
Platinum	4,598	13	4,424	10
Gold	4,628	13	4,368	10
Silver	11,083	32	12,012	28
Bronze	11,986	35	16,013	38
Minimum Coverage	2,168	6	5,543	13
Total	34,463	N/A	42,360	N/A

Source: CalHEERS

Note: "Eligible individuals," refers to eligible individuals, who selected a QHP. Please see page 31 for additional explanation on, "Minimum Coverage," under Unsubsidized Coverage. The percent of Eligible Individuals are rounded to nearest whole number.

HEALTH PLAN ENROLLMENT (COVERED CALIFORNIA)

Covered California Subsidized QHP Enrollees by FPL April 1, 2015 – September 30, 2015



Source: CalHEERS

Note: Not shown are 1,503 Medi-Cal ineligible enrollees with incomes <100 % FPL or American Indian/Alaska Native enrollees with no income test. QHP enrollees, who do not receive subsidies, and either completed the unsubsidized application, which does not have an income section, or have incomes over 400 % FPL.

- 54 percent of subsidized enrollees, who selected a QHP in this reporting period, have household income below 201 % FPL, about the same as the prior reporting period.

Percentage FPL	Reporting Period: April – September 2015		Prior Reporting Period: January – March 2015	
	Number of Eligible Individuals	Percentage of Eligible Individuals	Number of Eligible Individuals	Percentage of Eligible Individuals
100 to 150 % FPL	25,356	22	57,989	19
151 to 200 % FPL	37,585	32	110,743	37
201 to 250 % FPL	20,832	18	59,160	20
251 to 400 % FPL	31,864	27	69,584	23
Other ¹⁵	814	1	1,503	1
Total	116,451	N/A	298,979	N/A

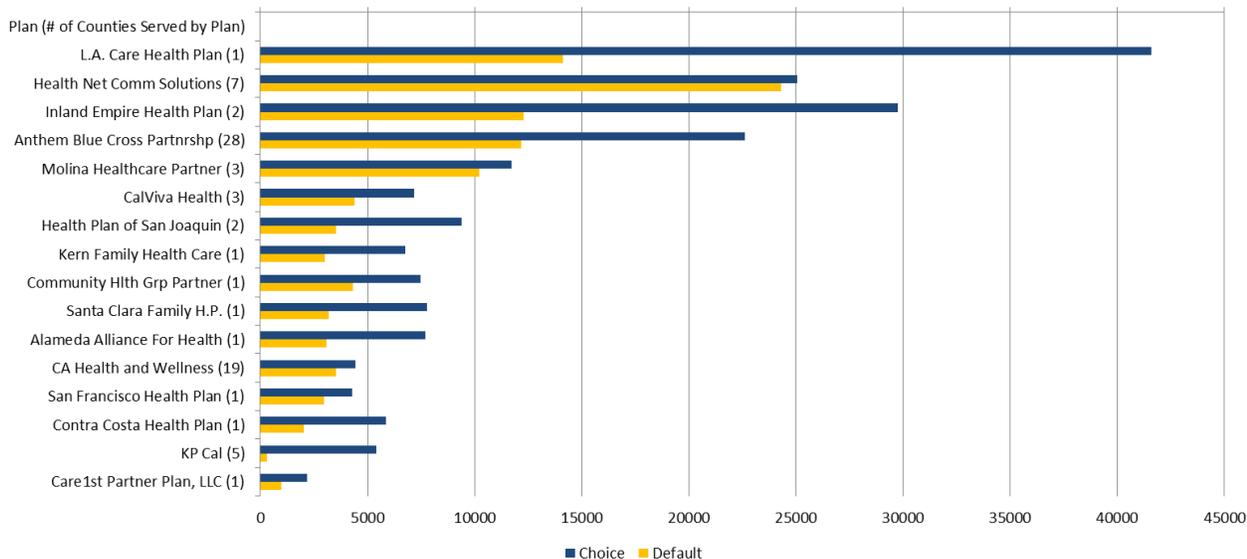
Source: CalHEERS

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

¹⁵ Other includes American Indian/Alaska Native individuals, who qualify for subsidies regardless of FPL and individuals with incomes below 100 % FPL, who are not eligible for Medi-Cal.

HEALTH PLAN ENROLLMENT (MEDI-CAL HEALTH PLANS)

New Enrollment in Medi-Cal Managed Care Health Plans April 1, 2015 – September 30, 2015



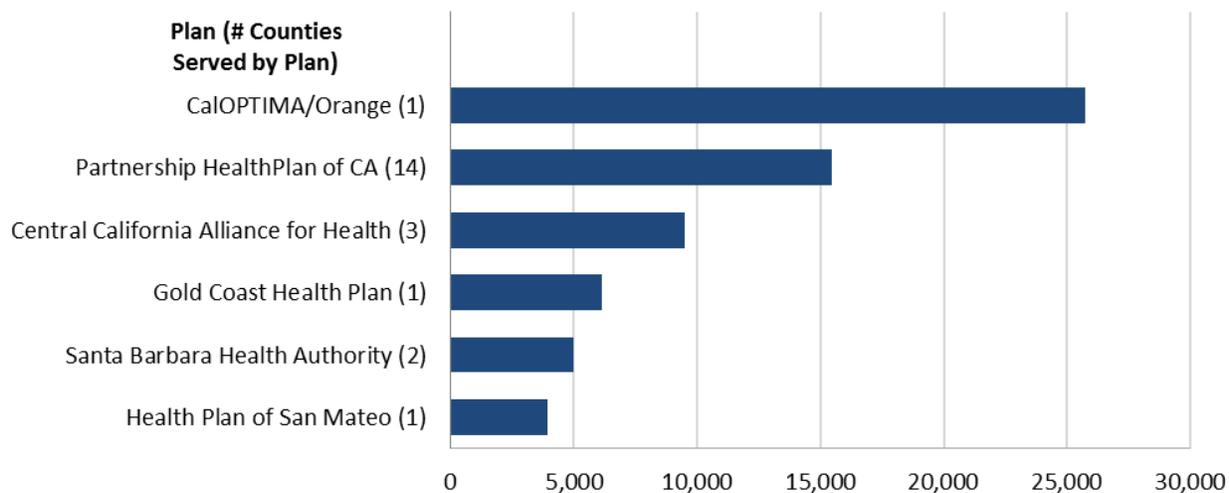
Source: Health Care Options

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, 199,000 chose and were enrolled in a MCP during the reporting period; while approximately another 104,000 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.
 - The following individuals are not reflected in the chart above: Approximately 4,000 more beneficiaries eligible for partial Medi-Cal benefits not associated with a health plan.
 - Eligible beneficiaries enrolled in a MCP during the reporting period without record of whether the enrollment was a selection or a default.
 - Individuals enrolled in a COHS plan. COHS plan enrollment data is reported on p.38.

HEALTH PLAN ENROLLMENT (MEDI-CAL HEALTH PLANS)

New Enrollment in COHS Health Plans April 1, 2015 – September 30, 2015



Source: MEDS

- From April – September 2015, just over 65,000 new Medi-Cal enrollees were enrolled in COHS health plans.

RENEWALS

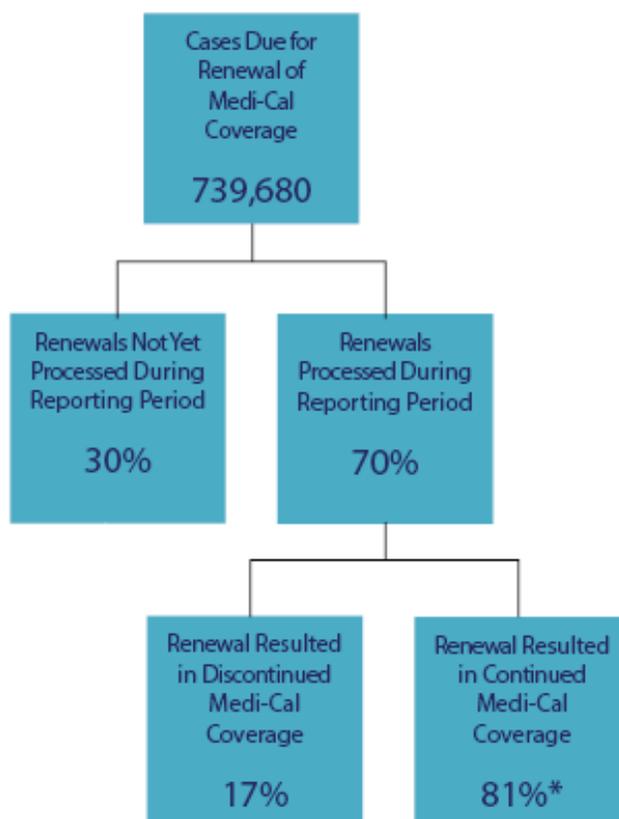
Data Sources and Methods

QHP renewals are completed once annually. As a result, there are no new data on QHP renewals in this reporting period. The report covering October – December 2014, contains the most recent information on QHP renewals.

Data on Medi-Cal renewals are from the three SAWS consortia. Unlike renewal of QHP coverage through Covered California, Medi-Cal renewals take place throughout the year. Each beneficiary must renew eligibility on an annual basis, and their renewal date is based on their initial eligibility determination date. Beneficiaries, who do not complete the renewal process by the required deadline, have up to 90 days after their discontinuance date to request reinstatement of coverage.

MEDI-CAL COVERAGE RENEWALS – CASE LEVEL

- For Medi-Cal renewals due April – September 2015, 70 percent were processed and 81 percent of those resulted in continued Medi-Cal coverage. In the first quarter of 2015, 77 percent of processed renewals resulted in continued Medi-Cal coverage.
- Note that a case may include more than one individual in a family. Renewals do not include individuals enrolled in Medi-Cal through their receipt of SSI, CalWORKs, and Former Foster Care.



*Less than 2% of renewals were due to cases reinstated during the 90-day period following discontinuance of coverage.

Source: SAWS

APPEALS

Data Sources and Methods

Eligibility appeals for both Covered California and Medi-Cal are processed and adjudicated by Administrative Law Judges and CDSS staff. This report shows data for appeals regarding eligibility for Covered California QHPs; appeals regarding eligibility for Medi-Cal; and appeals for cases that involved both Covered California and Medi-Cal. Appeals, which involved both programs refer to applications, whose household members applied for and/or had eligibility determinations made for the two programs, i.e., parents were eligible for Covered California and the child(ren) were eligible for Medi-Cal. A hearing is a method whereby a household member may obtain an impartial review of a county action or inaction. This process is mandated by federal law and is administered by CDSS.

Data are presented for appeals filed and adjudicated between April and September 2015.

APPEALS

Eligibility Actions Appealed April 1, 2015 – September 30, 2015

Program	Denial of Coverage	Eligibility Determination	Discontinuance
Covered California QHPs	3,129	655	793
Covered California & Medi-Cal	1,506	411	114
Medi-Cal	1,641	647	79
Total During April– September 2015	6,276	1,713	986
Prior Reporting Period January – March 2015	3,325	890	463

Source: CDSS

- Between April and September 2015, a total of 8,975 appeals were filed by Covered California and Medi-Cal applicants.
- Of these, 70 percent were appeals regarding denials of eligibility, 19 percent were regarding eligibility determinations, and 11 percent were regarding discontinuances from existing coverage.

Hearing Results April 1, 2015 – September 30, 2015

Program	Granted	Granted in Part	Denial of Appeal	Withdrawals/Dismissals
Covered California QHPs	866	207	184	3043
Covered California and Medi-Cal	352	212	32	1294
Medi-Cal	211	18	52	1482
Total April– September 2015	1429	437	268	5819
Prior Reporting Period January – March 2015	424	124	86	2,183

Source: CDSS

- Between April and September 2015, 23 percent of appeals were granted or granted in part and 3 percent were denied. The remaining 73 percent were withdrawn or dismissed.

Applications → Applicants → Eligibility Determination → Enrollment → Renewal

TOTAL ENROLLMENT IN MEDI-CAL AND QHP

Data Sources and Methods

Previous sections of this report describe applicants and individuals found newly eligible for Medi-Cal and QHP during the reporting period from April – September 2015. This final section examines changes in total enrollment from the beginning to the end of the reporting period. Data presented in this section draw from analyses conducted by the DHCS' Research and Analytic Studies Division (RASD), which compiles official statistics and performs analytic studies to assist DHCS in achieving its mission and goals.

Changes in *total* Medi-Cal enrollment from month to month reflect 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. To determine the number of current enrollees, DHCS uses MEDS data and a special definition of Medi-Cal beneficiaries referred to as, "certified eligibles." Certified eligibles are those beneficiaries, who have a valid eligibility determination and have completed enrollment into Medi-Cal. Individuals granted temporary enrollment under other Presumptive Eligibility programs, most notably HPE, are included. The definition excludes: (1) those in the process of becoming eligible, but have not yet completed enrollment; (2) have an unmet monthly share-of-cost obligation; (3) members in the California Family Planning, Access, Care, and Treatment Program, and (4) individuals granted provisional Medi-Cal enrollment under the Presumptive Eligibility Program for Pregnant Women.

The initial certified eligible count for a given time period is generally understated and will grow through the passage of time as individuals are retroactively enrolled into Medi-Cal. Traditionally, a single month's certified eligible counts have grown by 6 to 7 percent after the passage of 4 to 6 months from the initial count. Eligible counts still in the preliminary months of reporting and have yet to be finalized are referred to as incomplete counts, because enrollment data from this reporting period are less than 6 months old.

Note that for the change in enrollment of individuals eligible under MAGI Medi-Cal aid codes, this reporting period includes a new group of children not included in the "children" category in the prior reporting period. This new group is Optional Targeted Low Income Children. These counts do not include MAGI aid codes covering state and county inmates. The Pregnant Women category does not include pregnant women who were enrolled through MCAP. Aid codes are categories that describe the eligibility criteria individuals qualify for in Medi-Cal, and the benefits for which they are eligible.

Changes in total QHP enrollment during this reporting period are reported based on effectuated enrollment between March 31, 2015 (prior reporting period), and September 30, 2015. These data were provided by CalHEERS. Enrollment is considered effectuated when an individual pays the first month's premium for coverage. The counts include individuals, who effectuated their enrollment and had an active policy at the time the enrollment report was compiled.

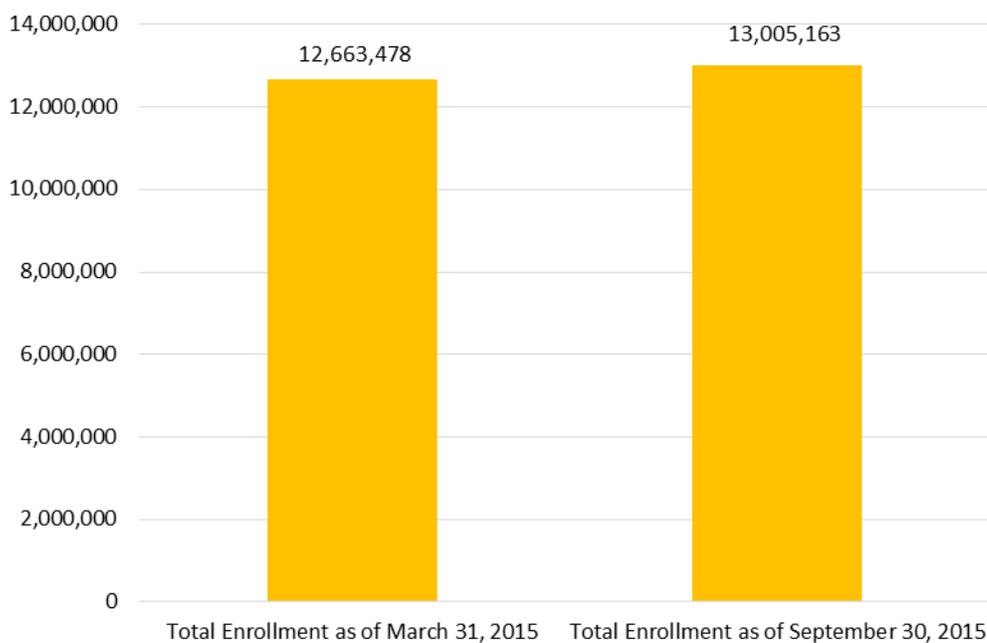
TOTAL ENROLLMENT IN MEDI-CAL AND QHP

Data Sources and Methods

DHCS and Covered California recognize the eligibility and enrollment challenges that exist within the insurance affordability programs they administer for applicants and beneficiaries and continue to strive towards improving the timeliness and accuracy of said eligibility and enrollment processes. This includes improving efforts on transitioning eligible individuals between Medi-Cal and Exchange products when their eligibility status changes.

TOTAL ENROLLMENT – MEDI-CAL

Total Medi-Cal Enrollment March 31, 2015 and September 30, 2015



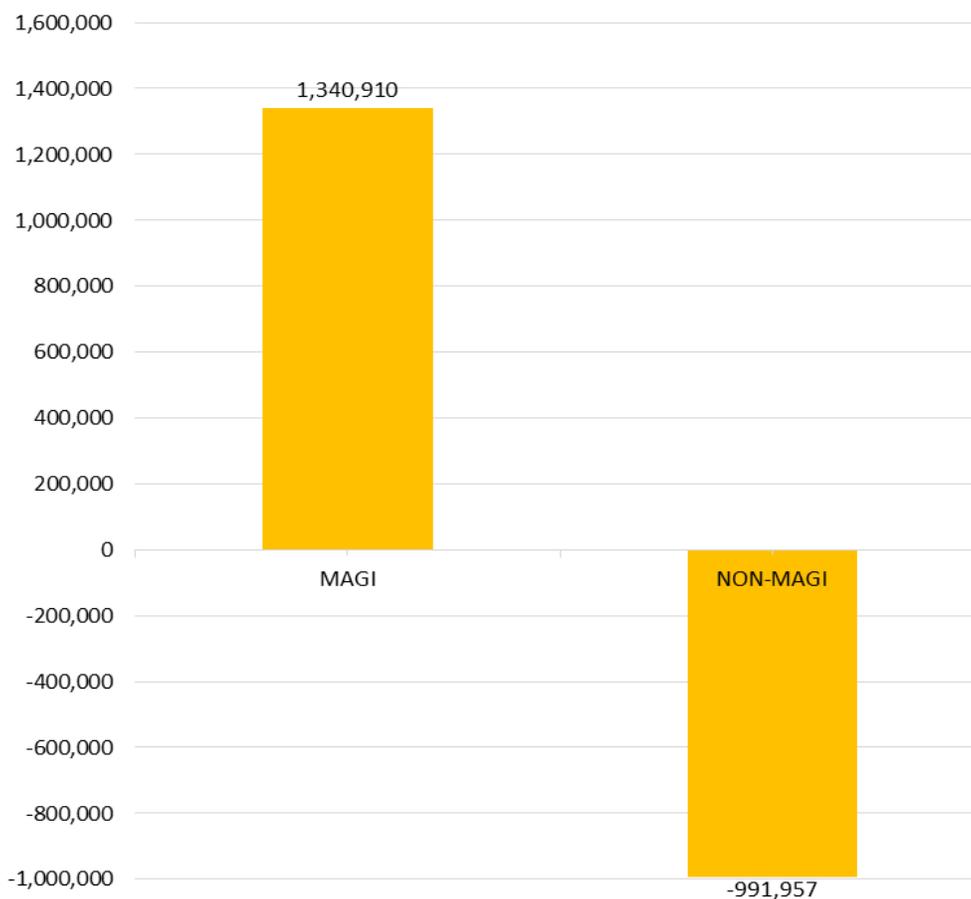
Source: Analysis by DHCS –RASD

- Between March 31, 2015 (prior reporting period), and September 30, 2015, total Medi-Cal enrollment increased by 341,685 individuals. This net change in enrollment reflects both new enrollments and dis-enrollments as individuals lose eligibility or exit the program.

Applications → Applicants → Eligibility Determination → Enrollment → Renewal

TOTAL ENROLLMENT – MEDI-CAL

Change in Total Medi-Cal Enrollment by MAGI and Non-MAGI April 1, 2015 - September 30, 2015



Source: Analysis by DHCS –RASD

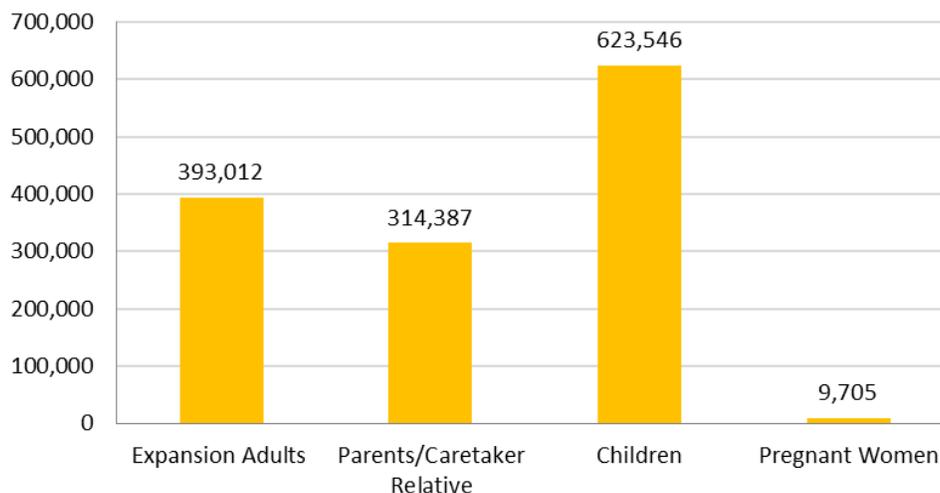
- The number of individuals enrolled in MAGI Medi-Cal increased by about 1,340,000 between April 1, 2015 and September 30, 2015.
- Conversely, enrollment under Non-MAGI aid codes dropped by roughly 990,000 during this same period. A summary of non-MAGI enrollment by category is shown on page 47.

The enrollment numbers for MAGI versus Non-MAGI individuals for this reporting period illustrate a shift from Non-MAGI to MAGI and is indicative of the concerted effort by the counties to review Pre-Affordable Care Act (Pre-ACA) and Non-MAGI Medi-Cal cases to establish eligibility for MAGI Medi-Cal when appropriate.

Applications → Applicants → Eligibility Determination → Enrollment → Renewal

NET CHANGE IN ENROLLMENT – MEDI-CAL

Change in Enrollment of Individuals Eligible Under MAGI Medi-Cal Aid Codes April 1, 2015 - September 30, 2015



Source: Analysis by DHCS-RASD

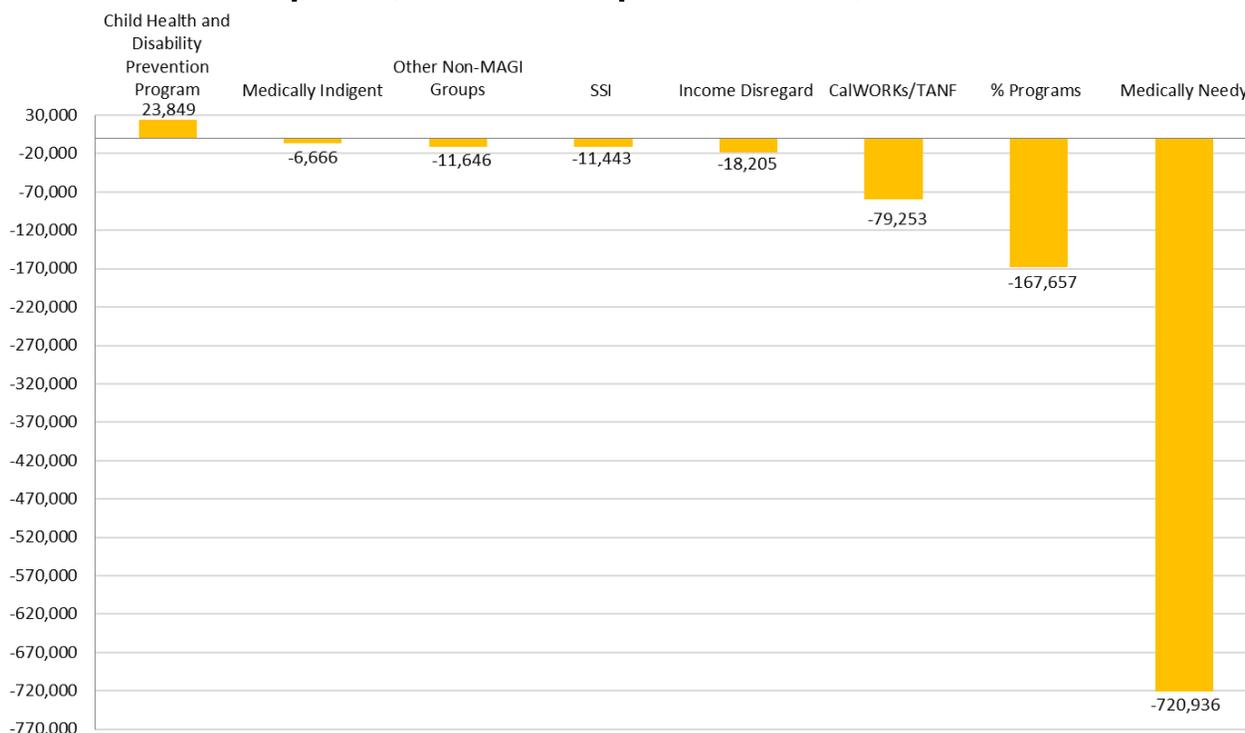
- During this reporting period, the number of individuals eligible under MAGI aid codes increased by about 1,300,000. This number includes individuals transitioning from Non-MAGI or pre-ACA aid codes to MAGI aid codes at annual redetermination, as well as individuals new to Medi-Cal, who enrolled during the reporting period.
- 47 percent of this increase came from children, consistent with the prior reporting period. Expansion adults represented a larger proportion of MAGI enrollments this reporting period (29 percent) as compared to the prior reporting period (17 percent).

Program Eligibility	Reporting Period: April – September 2015		Prior Reporting Period: January – March 2015	
	Change in Number of Eligible Individuals	Percent of Eligible Individuals	Change in Number of Eligible Individuals	Percent of Eligible Individuals
Children	623,546	47	416,595	47
Parents/Caretaker Relatives	314,387	23	307,956	35
Expansion Adults	393,012	29	162,065	17
Pregnant Women	9,705	1	5,398	1
Total	1,340,650	N/A	892,014	N/A

Applications → Applicants → Eligibility Determination → Enrollment → Renewal

NET CHANGE IN ENROLLMENT – MEDI-CAL

Change in Enrollment of Individuals Eligible Under Non-MAGI Medi-Cal Aid Codes April 1, 2015 - September 30, 2015



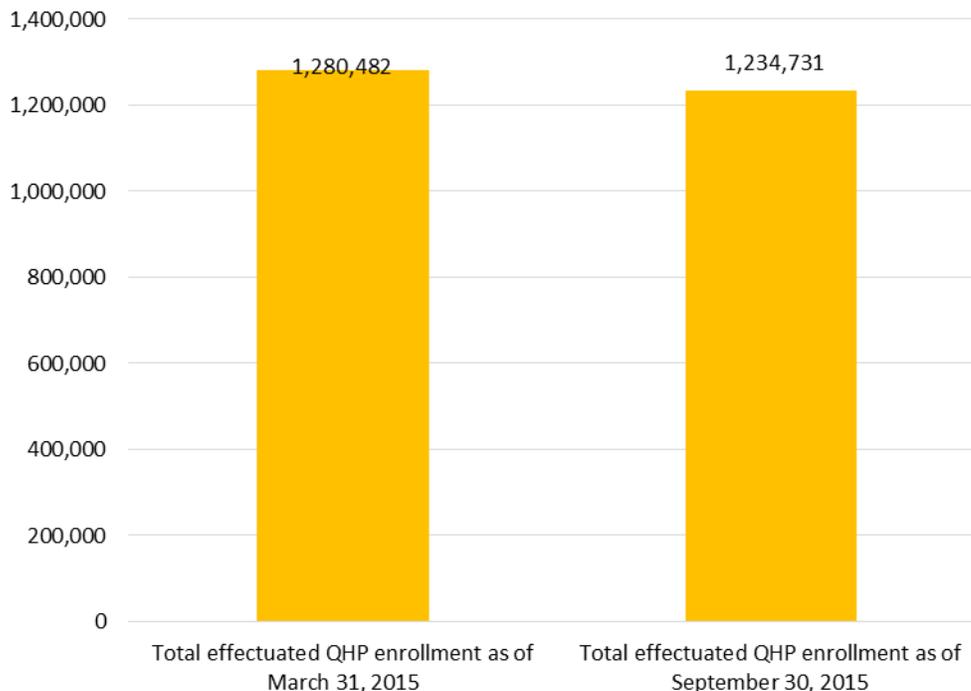
Source: Analysis by DHCS-RASD

Note: "Percent Programs," refers to the following Pre-ACA non-MAGI groups: 100 % FPL, 133 % FPL, and the Low Income Health Program. "Other Non-MAGI groups," includes Breast Cancer and Cervical Cancer Treatment Program, and Refugee Entrant. "Medically Needy" includes MN groups such as 1931(b) and Pre-ACA aid categories.

- Some applicants may be eligible for Medi-Cal on the basis of their household income and assets, as well as other characteristics, such as their age or disability status. This eligibility determination methodology is commonly referred to as non-MAGI Medi-Cal eligibility.
- Between April 1, 2015 and September 30, 2015, the number of individuals eligible under non-MAGI aid codes decreased by 991,957.

TOTAL EFFECTUATED ENROLLMENT – COVERED CA QHPS

Total Effectuated QHP Enrollment March 31, 2015 and September 30, 2015



Source: CalHEERS

- Comparing data for March 31, 2015 (prior reporting period), and September 30, 2015, total effectuated QHP enrollment decreased by 4 percent, or 45,751 individuals. This net change in effectuated QHP enrollment reflects both new enrollments and dis-enrollments as individuals exit QHP coverage.
- 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.

Applications → Applicants → Eligibility Determination → Enrollment → Renewal

ERRATA

- Page 12, Number of Applications Processed through Express Lane for January - March 2015, was updated from 2,210 to 60,798, due to a refined methodology which more accurately captures and calculates the Express Lane enrollment data.
- Page 17 of the previous report indicated incorrect percentage of Ethnicity of Applicants for the January – March 2015, reporting period. Please see page 18 of this report for correct percentage of Ethnicity of Applicants for prior reporting period.
- Page 49, the total effectuated QHP enrollment of March 31, 2015, was updated from 1,364,659 from previous report, to 1,280,482.