



CALIFORNIA ELIGIBILITY AND ENROLLMENT REPORT:

INSURANCE AFFORDABILITY PROGRAMS

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

For the Reporting Period
October 2015 through December 2015

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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 October 1, 2015, through December 31, 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 (FPL), who enroll in QHPs 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 OCTOBER– DECEMBER 2015

How Many Californians Applied for and Enrolled in Health Insurance?

- From October – December 2015, approximately 347,000 California residents applied and were determined eligible for Medi-Cal. During this reporting period, total enrollment in Medi-Cal increased by a net of approximately 202,000 individuals inclusive of new enrollment and disenrollment.
- From October – December 2015, more than 200,000 California residents applied, were determined eligible, and selected QHPs offered through Covered California.

Which Californians Applied for and Enrolled in Health Insurance?

- Children and youth (ages 0 to 17) continued to represent the largest share of applicants (30 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 October - December 2015.
- The share of applicants, whose primary spoken language was Spanish (28 percent), is similar to that reported in the previous quarter (31 percent). Of those, who reported an ethnicity in CalHEERS, approximately 36 percent of new Medi-Cal enrollees and 25 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, 82 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 October – December 2015, 85 percent of applications were filed with assistance, similar to the previous reporting period (83 percent).
- Approximately 47 percent of all applications submitted through CalHEERS from October – December 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 (25 percent).

² CalHEERS supports applications for enrollment submitted through 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 engine³;
- 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, which supports 18 counties;
 - Consortium IV, which supports 39 counties; and
 - Los Angeles Eligibility, Automated Determination, Evaluation and Reporting (LEADER) and LEADER Replacement System (LRS), which supports Los Angeles County.
- Application and enrollment data for Medi-Cal health plans are provided by Health Care Options and the MCAP are provided by MAXIMUS in partnership with the Department of Health Care Services (DHCS); and
- 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, page 8)

The count of applications received through all venues (blue box, top row of the overview figure, page 8) includes applications submitted in one of six ways:

- Through CalHEERS;
- Directly to County Human Services Agency offices;
- Through Hospital Presumptive Eligibility (HPE);
- Through MCAP;
- Through Express Lane; and
- 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; and
- 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; and
- The number of HPE applications submitted estimated to be one applicant per application.

Note: *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):

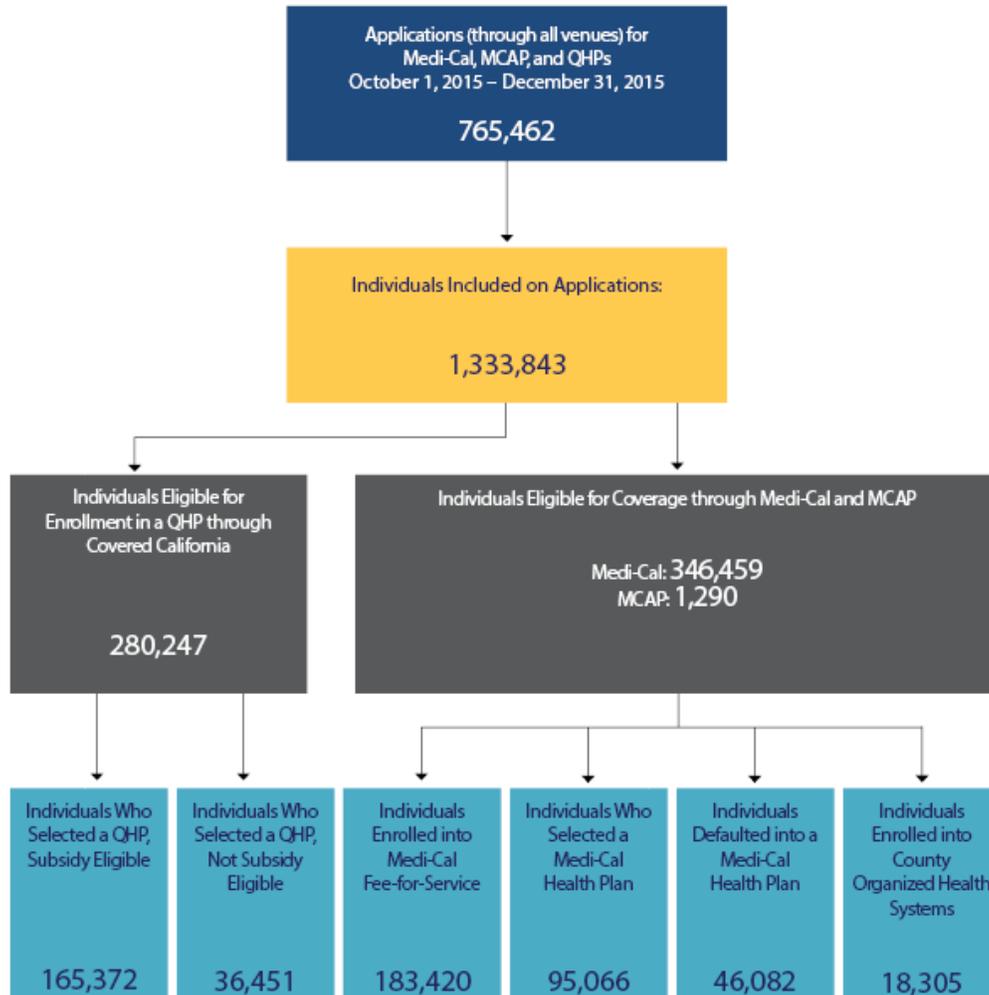
- Individuals newly eligible in the reporting period and enrolled into a Medi-Cal health plan, without record of whether the enrollment was a selection or a default;
- Individuals eligible for enrollment into a Medi-Cal health plan, but had not made a choice or been defaulted as of the end of the reporting period; and
- Individuals, who lost eligibility before enrollment into a health plan.

⁵ This data does not include MCAP enrollees.

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

OVERVIEW

This figure represents California application, eligibility, and enrollment data from October 1, 2015, through December 31, 2015.



Note: For a detailed explanation of these counts, please see the methods described on pages 6 and 7.

- The count of applications received through all venues (blue box) includes applications submitted in one of six ways:
 - Through CalHEERS;
 - Directly to County Human Services Agency offices;
 - Through HPE;
 - Through MCAP;
 - Through Express Lane; and
 - 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 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; and
- 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.

OVERVIEW

From October - December 2015, approximately 765,000 California residents applied for Medi-Cal, MCAP, and QHP; a decrease of 31 percent from October - December 2014. From October - December 2015, more than 280,000 California residents applied and were determined eligible, and selected QHPs offered through Covered California; a decrease of 17 percent from October - December 2014.

	Reporting Period: October – December 2015	Prior Reporting Period: April – September 2015 ⁷	Prior Reporting Period: October – December 2014 ⁸
Applications (through all venues) for Medi-Cal, MCAP, QHP	765,465	1,592,039	1,102,214
Individuals Included on Applications	1,333,843	3,057,760	1,580,484
Individuals Eligible for Enrollment in a QHP through Covered CA	280,247	225,224	336,830
Individuals, Who Selected a QHP, Subsidy Eligible	165,372	115,451	158,193
Individuals, Who Selected a QHP, Not Subsidy Eligible	36,451	34,463	26,333
Individuals Eligible for Coverage through Medi-Cal or MCAP	347,749	731,575	712,135
Individuals Enrolled into Medi-Cal FFS	183,420	354,648	N/A
Individuals, Who Selected Medi-Cal Health Plan	95,066	199,369	253,523
Individuals Defaulted into Medi-Cal Health Plan	46,082	104,369	223,593
Individuals Enrolled into County Organized Health Systems (COHS)	18,305	65,724	85,338

⁷ When comparing current and prior reporting period data, it is important to note that Prior Reporting Period: April – September 2015 represents a 6 month reporting period; in contrast to the current Reporting Period: October-December 2015, which represents a 3 month reporting period.

⁸ Data on individuals eligible for coverage through Medi-Cal or MCAP, enrolled into FFS, selected Medi-Cal health plan, defaulted into Medi-Cal health plan, and enrolled into COHS in the reporting period October - December 2014, were tabulated differently from data presented for this reporting period, and should not be directly compared to the numbers reflected on this report.

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 October – December 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.

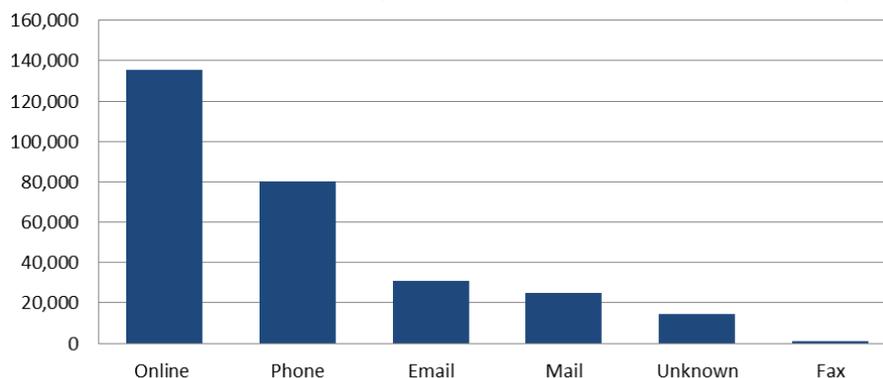
Applicants through Express Lane, an expedited enrollment process for beneficiaries in CalFresh, and those transitioning from APTC to Medi-Cal, and HPE are tabulated separately for this reporting period. These policies became effective in January 2014. Data on applications through Express Lane in the fourth quarter of 2014 were tabulated differently from data presented for prior and current 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

October 1, 2015 – December 31, 2015



Source: CalHEERS

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

- About 47 percent of all applications received through CalHEERS during October – December 2015, were initiated online, including those filed with and without assistance;
- The share of applications initiated online decreased by 8 percent and applications received by mail (9 percent) is about the same as it was in the previous reporting period of 2014; and
- Relatively, more applications were initiated by email (4 percent) since the previous reporting period for 2014.

Submission Channel	Reporting Period: October – December 2015		Prior Reporting Period: April – September 2015		Prior Reporting Period: October – December 2014	
	Number of Applications	Percent of Applications	Number of Applications	Percent of Applications	Number of Applications	Percent of Applications
Online	135,417	47	167,034	53	173,678	55
Phone	80,253	28	86,184	27	91,843	29
Email	30,907	11	25,255	8	22,091	7
Mail	25,000	9	36,143	11	28,652	9
Unknown ⁹	14,401	5	1,508	<1	N/A	N/A
Fax	1,211	0	1,680	1	1,509	N/A
Total	287,189	N/A	317,804	N/A	317,773	N/A

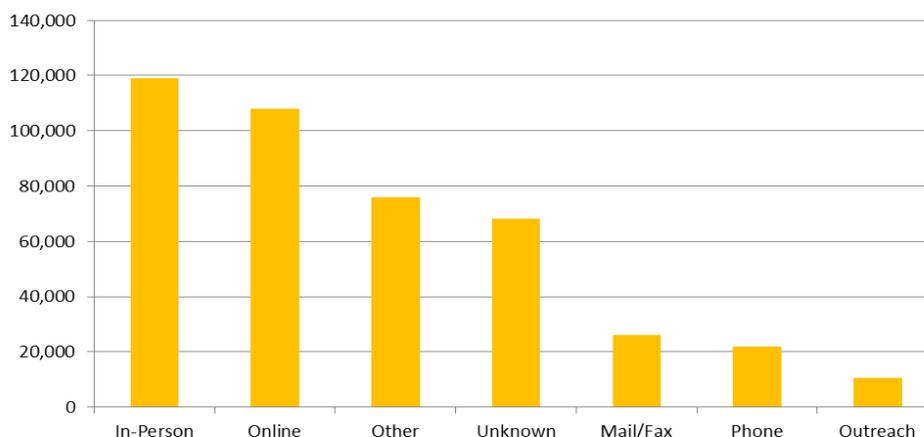
Source: CALHEERS

⁹ There is a defect in the CalHEERS data source which resulted in an increase to the *Number of Applications* submitted through *Unknown* submission channel for this reporting period. Covered CA is working to resolve the issue.

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

APPLICATIONS RECEIVED

Applications Received Through County Human Services Agency Offices by Submission Channel October 1, 2015 – December 31, 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 (28 percent), followed by online applications through www.benefitscal.com (25 percent);
- Comparatively, the percentage of applications initiated online and mail/fax are about the same as the previous reporting period of 2014; and
- In addition to applications through CalHEERS and County Human Services Agency offices, applications through hospitals continued to be an important entry point for coverage.

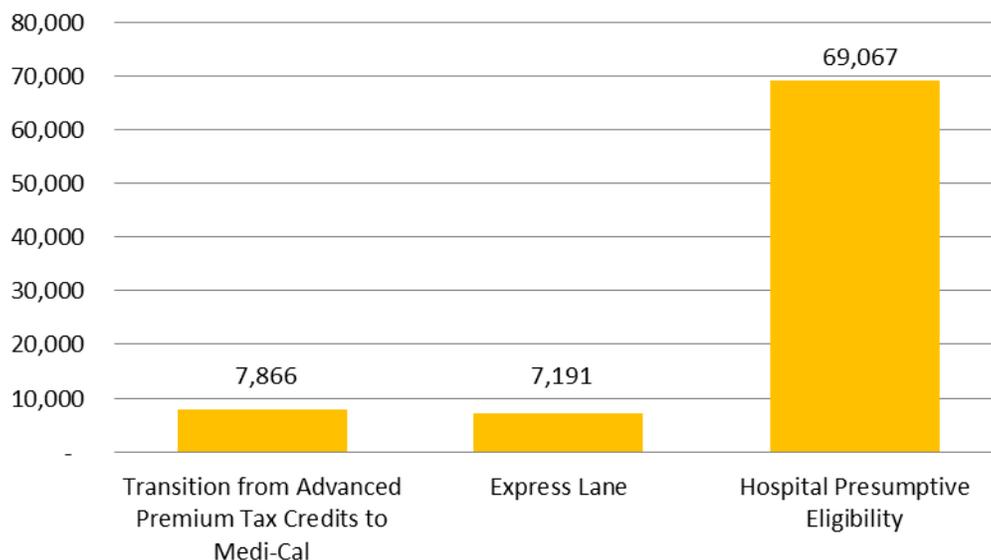
Submission Channel	Reporting Period: October – December 2015		Prior Reporting Period: April – September 2015		Prior Reporting Period: October – December 2014	
	Number of Applications	Percent of Applications	Number of Applications	Percent of Applications	Number of Applications	Percent of Applications
In-Person	119,055	28	246,190	27	196,462	28
Online (BenefitsCal.com)	108,045	25	220,397	24	162,132	23
Other	75,918	18	164,595	18	104,696	15
Unknown	68,025	16	143,275	16	62,580	9
Mail/Fax	26,223	6	61,832	7	46,098	7
Phone	21,782	5	51,990	6	77,004	11
Outreach	10,558	2	25,728	3	57,139	8
Total	429,606	N/A	914,007	N/A	706,111	N/A

Source: SAWS

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

APPLICATIONS RECEIVED

Medi-Cal Applications Processed Through Other Eligibility Pathways October 1, 2015 – December 31, 2015



Source: MEDS

- Approximately 84,124 individuals became newly eligible to Medi-Cal through alternative channels intended to expedite enrollment; and
- The share of applications submitted through HPE for this reporting period was 82 percent.

Pathway	Reporting Period: October – December 2015	Prior Reporting Period: April – September 2015	Prior Reporting Period: October – December 2014
	Number of Applications	Number of Applications	Number of Applications
Transition from APTC to Medi-Cal	7,866	16,785	N/A
Express Lane ¹¹	7,191	23,528	48,596
HPE	69,067	151,615	76,265

Source: MEDS

¹¹ Data on the number of Express Lane applications during October 2014 – December 2014, 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 page 10 for additional details.

APPLICATIONS RECEIVED

Applications Filed with the Help of an Assister or Navigator

- Approximately 85 percent of applications determined eligible for QHPs were filed with the help of an Agent (51 percent), Service Center Representative (15 percent), CEC (6 percent), County Eligibility Worker (1 percent), or Plan-Based Enroller (2 percent). This is about the same from the previous reporting period of April - September in which 83 percent of applications determined eligible for QHPs were filed with help;
- Roughly 5 percent of applications determined eligible for Medi-Cal were filed with the help of an Agent or CEC, about the same from the prior reporting period (4 percent); and
- 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

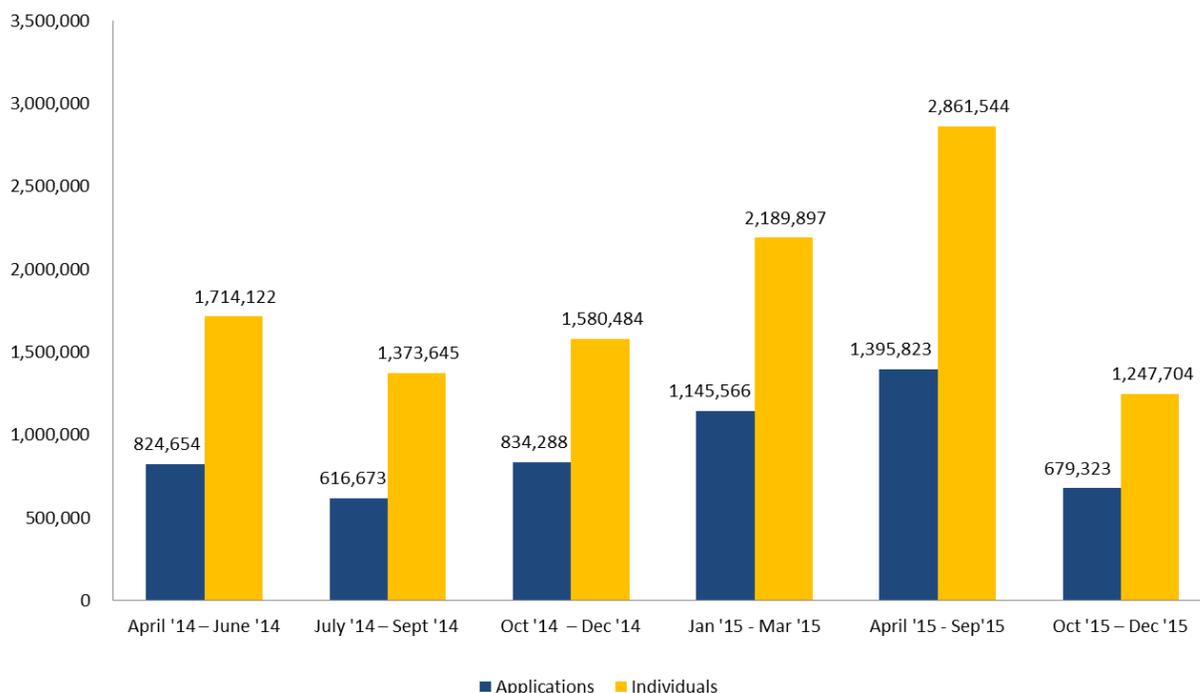
Data Sources and Methods

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 October – December 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-Cal¹², 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.

¹² 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 October 1, 2015 – December 31, 2015



Source: CalHEERS

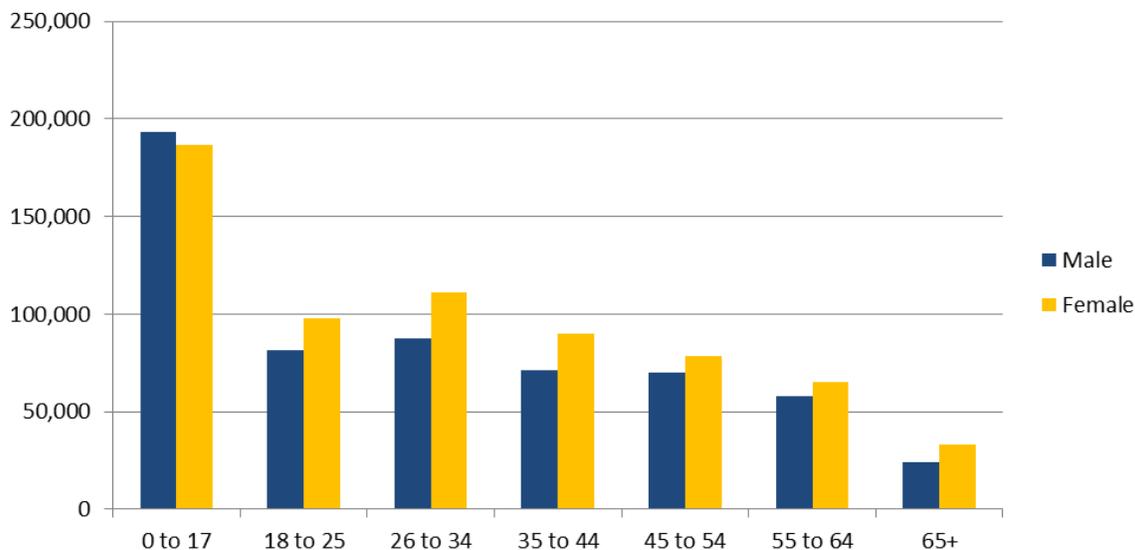
Note: April – September 2015 represent 6 month reporting period.

- The 679,323 total applications received through CalHEERS (a subset of top blue box, page 8) from October 1, 2015 – December 31, 2015, represent 287,189 individuals, who submitted applications directly to CalHEERS (through available submission channels depicted on page 11), for a total of 1,247,704 individuals included on applications (which excludes Express Lane, HPE, MCAP, and APTC to Medi-Cal applications);
- Roughly 720,000 fewer applications were submitted October – December 2015, as compared to April 2015 – September 2015; and
- 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 October 1, 2015 – December 31, 2015



Source: CalHEERS

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

- 379,930 children (ages 0 to 17) and 179,313 young adults (ages 18 to 25) applied for health insurance through CalHEERS; and
- Children (ages 0 to 17) and adults (ages 26 to 34) continue to represent the largest share of applicants received through CalHEERS during this and the prior reporting periods.

Age, Gender	Reporting Period: October - December 2015		Prior Reporting Period: April - September 2015		Prior Reporting Period: October - December 2014	
	Number of Individuals	Percent of Individuals ¹³	Number of Individuals	Percent of Individuals	Number of Individuals	Percent of Individuals
0 to 17	379,930	30	1,034,917	36	492,475	31
18 to 25	179,313	14	405,921	14	231,234	15
26 to 34	198,078	16	426,930	15	252,063	16
35-44	161,346	13	368,034	13	204,245	13
45 to 54	148,585	12	293,080	10	196,830	12
55 to 64	123,442	10	212,254	7	158,144	10
65+	57,010	5	120,406	4	45,493	3
Male	585,909	47	1,330,055	46	745,888	47
Female	661,795	53	1,531,487	54	834,596	53

Source: CALHEERS

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

APPLICANT DEMOGRAPHICS (RACE)

Race of Applicants Included on Applications (of Those, Who Reported Race) October 1, 2015 – December 31, 2015

Race ¹⁴	Reporting Period: October - December 2015		Prior Reporting Period: April – September 2015		Prior Reporting Period: October – December 2014	
	Number of Individual Applicants by Race	Percent of Individual Applicants by Race ¹⁵	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	311,592	51	696,112	52	430,780	53
Black or African American	76,098	12	190,133	14	88,648	11
Other	70,134	12	150,106	11	88,875	5
Chinese	30,699	5	57,790	4	37,541	5
Vietnamese	24,520	4	69,519	5	31,312	4
Filipino	26,609	4	53,682	4	32,072	4
Mixed Race	19,210	3	30,956	2	33,770	4
Other Asian	13,886	2	29,823	2	17,193	2
Asian Indian	11,736	2	23,445	2	15,564	2
Korean	11,603	2	17,142	1	13,250	2
American Indian and/or Alaska Native	5,728	1	14,793	1	9,021	1
Other Pacific Islander	1,974	<1	5,160	<1	2,648	<1
Samoan	1,558	<1	4,625	<1	1,909	<1
Japanese	2,526	<1	3,807	<1	3,076	<1
Native Hawaiian	953	<1	3,227	<1	1,247	<1
Guamanian or Chamorro	494	<1	1,296	<1	731	<1%
Not Reported	638,384	N/A	1,509,928	N/A	772,847	N/A
Total	1,247,704	N/A	2,861,544	N/A	1,580,484	N/A

Source: CalHEERS

- Nearly half of applicants applying through CalHEERS indicated their race, and the distribution of racial groups was similar to prior reporting period. Applicants are not required to indicate race; and
- The share of applications received through CalHEERS, who reported race as White or African American are about the same as the previous reporting periods of 2014.

¹⁴ Individuals may be included more than once, if they submitted multiple applications.

¹⁵ The percent of Individuals are rounded to nearest whole number. Percentages are calculated as a proportion of the total enrollees, who reported their language

APPLICANT DEMOGRAPHICS (ETHNICITY)

Ethnicity of Applicants Included on Applications (of Those, Who Reported an Ethnicity) October 1, 2015 – December 31, 2015

Ethnicity ¹⁶	Reporting Period: October - December 2015		Prior Reporting Period: April – September 2015		Prior Reporting Period: October – December 2014	
	Number of Individual Applicants by Ethnicity	Percent of Individual Applicants by Ethnicity ¹⁷	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 not reported	415,723	33	1,196,307	42	503,931	32
Hispanic – ethnic origin reported	178,059	14	362,049	13	246,895	15
Mexican/Mexican American/Chicano	141,323	79	308,099	85	210,071	85
Puerto Rican	3,404	2	3,596	13	28,798	12
Mixed Ethnicity	2,148	1	2,658	1	3,878	2
Other	30,256	17	46,126	1	2,939	1
Cuban	928	1	1,570	<1	1,209	<1
Not Hispanic	547,333	44	1,218,346	43	703,993	44
Ethnicity not reported	106,589	N/A	84,842	N/A	144,826	N/A
Total	1,247,704	N/A	2,861,544	N/A	1,599,645	N/A

Source: CalHEERS

- Approximately 91 percent of applicants reported their ethnicity, as compared to 97 percent in the prior reporting period. Among those, who reported being Hispanic, 32 percent reported their specific ethnic origin. Applicants are not required to indicate their ethnicity or ethnic origin; and
- 52 percent¹⁸ of those reporting their ethnicity in the fourth quarter of 2015 identified as Hispanic, similar to 56 percent in the prior reporting period.

¹⁶ 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.

¹⁷ The percent of Individuals are rounded to nearest whole number.

¹⁸ Total count of individuals, who reported being Hispanic is divided by the number of individuals, who reported ethnicity.

APPLICANT DEMOGRAPHICS (WRITTEN LANGUAGE)

Primary Written Language of Applicants Included on Applications (of Those Who Reported a Primary Written Language) October 1, 2015 – December 31, 2015

Primary Language ¹⁹	Reporting Period: October - December 2015		Prior Reporting Period: April – September 2015		Prior Reporting Period: October – December 2014	
	Number of Applicants by Language	Percent of Applicants by Language ²⁰	Number of Applicants by Language	Percent of Applicants by Language	Number of Applicants by Language	Percent of Applicants by Language
English	752,328	72	1,567,468	69	960,194	72
Spanish	264,874	25	656,149	29	335,060	25
Traditional Chinese Character	9,689	1	18,064	<1	12,191	1
Vietnamese	8,279	1	24,546	1	10,375	1
Korean	4,791	<1	6,092	<1	5,893	<1
Armenian	2,113	<1	2,444	<1	1,208	<1
Russian	1,247	<1	2,322	<1	1,503	<1
Tagalog	1,198	<1	2,770	<1	1,307	<1
Mandarin	1,171	<1	<20		27	<1
Farsi	1,155	<1	2,080	<1	1,401	<1
Arabic	1,080	<1	2,364	<1	1,360	<1
Cambodian	486	<1	896	<1	406	<1
Cantonese	320	<1	<20		<20	<1
Hmong	248	<1	848	<1	442	<1
Not Reported	198,725	N/A	575,485	N/A	249,107	N/A
Total	1,247,704	N/A	2,861,544	N/A	1,580,484	N/A

Source: CalHEERS

- The share of applicants received through CalHEERS, whose primary written language was Spanish (25 percent) and English (72 percent), remained similar to the previous reporting period.

¹⁹ Individuals may be included more than once, if they submitted multiple applications.

²⁰ The percent of Applicants are rounded to nearest whole number.

APPLICANT DEMOGRAPHICS (SPOKEN LANGUAGE)

Primary Spoken Language of Applicants Included on Applications (of Those Who Reported a Primary Spoken Language) October 1, 2015 – December 31, 2015

Primary Language ²¹	Reporting Period: October - December 2015		Prior Reporting Period: April – September 2015		Prior Reporting Period: October – December 2014	
	Number of Applicants by Language	Percent of Applicants by Language ²²	Number of Applicants by Language	Percent of Applicants by Language	Number of Applicants by Language	Percent of Applicants by Language
English	819,809	68	1,820,506	65	1,045,441	69
Spanish	331,911	28	874,678	31	411,665	27
Vietnamese	14,722	1	47,201	2	18,704	1
Mandarin	7,790	1	14,230	1	12,545	1
Cantonese	7,717	1	22,050	1	11,767	1
Korean	5,473	<1	7,712	<1	6,670	<1
Arabic	3,071	<1	8,063	<1	3,895	<1
Tagalog	3,074	<1	7,468	<1	3,580	<1
Russian	2,552	<1	6,075	<1	3,090	<1
Hmong	1,452	<1	5,384	<1	2,217	<1
Farsi	2,468	<1	4,700	<1	2,905	<1
Armenian	2,520	<1	4,384	<1	2,489	<1
Cambodian	784	<1	1,935	<1	961	<1
Not Reported	44,361	N/A	37,158	N/A	54,555	N/A
Total	1,247,704	N/A	2,861,544	N/A	1,580,484	N/A

Source: CalHEERS

- The share of applicants applying through CalHEERS, whose primary spoken language was Spanish (28 percent), is about the same as the previous reporting periods. The share of applicants, whose primary spoken language was English (68 percent) are about the same as the previous reporting period of 2014 (69 percent).

²¹ Individuals may be included more than once, if they submitted multiple applications.

²² The percent of Applicants are rounded to nearest whole number.

ELIGIBLE INDIVIDUALS

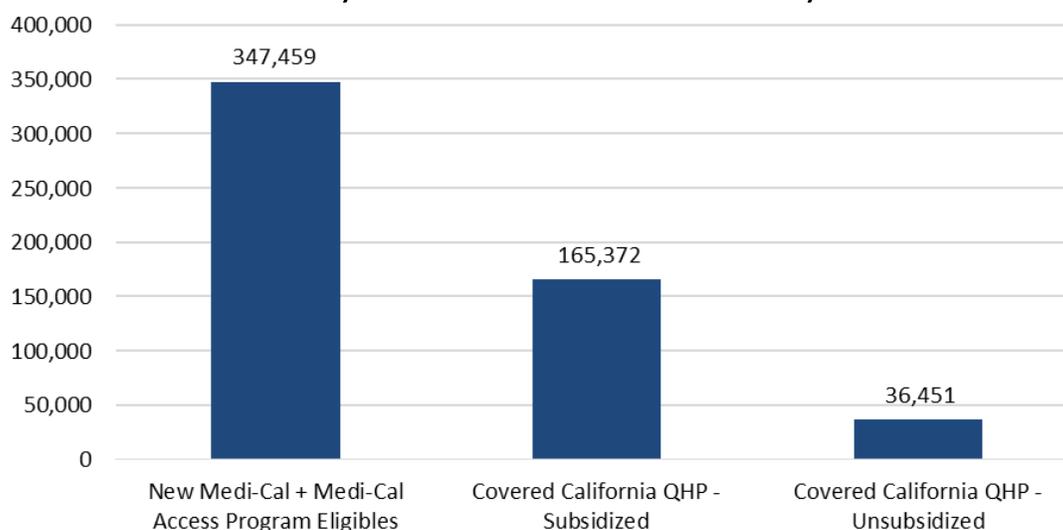
Data Sources and Methods

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 October 1, 2015 – December 31, 2015



Source: CalHEERS, MEDS and MAXIMUS

- Overall, 93 percent of eligible individuals were eligible for Medi-Cal, MCAP, or subsidized QHPs; up from 87 percent in the previous reporting period. The remaining 7 percent qualified for unsubsidized QHPs; and
- 82 percent of individuals determined eligible for QHPs and selected a plan qualified for subsidies is a larger share than the 77 percent eligible for subsidies in the previous reporting period.

Program Eligibility	Reporting Period: October - December 2015		Prior Reporting Period: April - September 2015		Prior Reporting Period: October - December 2014	
	Number of Eligible Individuals	Percent of Eligible Individuals ²³	Number of Eligible Individuals	Percent of Eligible Individuals	Number of Eligible Individuals	Percent of Eligible Individuals
Medi-Cal Eligibles	346,169	63	729,005	83	710,780	79
MCAP Eligibles	1,290	<1	2,570	<1	1,355	<1
Covered California QHP - Subsidized ²⁴	165,372	30	116,451	4	157,498	18
Covered California QHP - Unsubsidized	36,451	7	34,463	13	27,028	3
Total	549,282	N/A	882,489	N/A	896,661	N/A

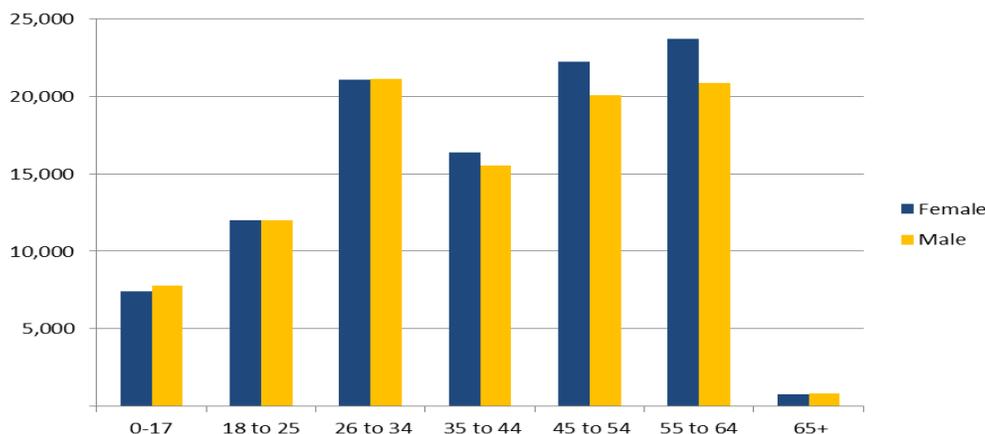
Source: CALHEERS

²³ The percent of Individuals are rounded to nearest whole number.

²⁴ For subsidized and unsubsidized QHPs, "eligible individuals," refers to eligible individuals, who selected a QHP.

DEMOGRAPHICS OF ELIGIBLE INDIVIDUALS (GENDER, AGE)

Age and Gender of Eligible Individuals Selecting a QHP October 1, 2015 – December 31, 2015



Source: CalHEERS

- Over 15,000 children and youth (ages 0 to 17) and about 24,000 young adults (ages 18 to 25) were determined eligible for QHP and selected a plan in the reporting period; and
- Among individuals, who selected a QHP, the largest shares were ages 55 to 64, are about the same as the previous reporting periods.

Age, Gender ²⁵	Reporting Period: October - December 2015		Prior Reporting Period: April - September 2015		Prior Reporting Period: October - December 2014	
	Number of Eligible Individuals	Percent of Eligible Individuals ²⁶	Number of Eligible Individuals	Percent of Eligible Individuals	Number of Eligible Individuals	Percent of Eligible Individuals
0 to 17	15,153	8	14,056	9	13,230	7
18 to 25	24,003	12	16,255	11	21,249	12
26 to 34	42,150	21	36,496	24	32,443	18
35 to 44	31,912	16	25,834	17	30,699	17
45 to 54	42,285	21	28,512	19	43,598	24
55 to 64	44,558	22	27,955	19	43,226	23
65+	1,625	1	1,793	1	81	<1
Male	98,146	49	71,673	53	89,013	48
Female	103,540	51	79,228	47	95,513	52

Source: CALHEERS

²⁵ "Eligible individuals," refers to eligible individuals, who selected a QHP.

²⁶ The percent of Individuals are rounded to nearest whole number.

DEMOGRAPHICS OF ELIGIBLE INDIVIDUALS (RACE)

Race of Eligible Individuals Selecting a QHP (of Those, Who Reported Race) October 1, 2015 – December 31, 2015

Race ²⁷	Reporting Period: October - December 2015		Prior Reporting Period: April – September 2015		Prior Reporting Period: October – December 2014	
	Number of Eligible Individuals by Race	Percent of Eligible Individuals by Race ²⁸	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	60,312	56	46,717	56	56,085	56
Other	11,336	10	8,752	10	10,529	10
Chinese	9,152	8	6,170	7	7,882	8
Mixed Race	4,488	4	3,756	4	4,462	4
Filipino	4,317	4	3,328	4	3,568	4
Black or African American	4,304	4	3,450	4	3,755	4
Korean	4,169	4	2,819	3	4,122	4
Vietnamese	3,377	3	3,094	4	3,701	4
Asian Indian	3,104	3	2,542	3	2,816	3
Other Asian	1,980	2	1,449	2	1,769	2
Japanese	937	1	600	1	806	1
American Indian and/or Alaska Native	550	1	650	1	668	1
Other Pacific Islander	257	<1	182	<1	236	<1
Samoan	72	<1	59	<1	51	<1
Native Hawaiian	48	<1	29	<1	24	<1
Guamanian or Chamorro	47	<1	42	<1	51	<1
Not Reported	93,373	N/A	67,275	N/A	84,001	N/A
Total	201,823	N/A	150,914	N/A	184,526	N/A

Source: CalHEERS

- About 54 percent of eligible individuals, who selected a QHP, indicated their race. Applicants are not required to indicate their race; and
- The racial distribution of eligible individuals, who selected a QHP, was comparable to the racial distribution across all individuals, who applied through CalHEERS (page 18), including those found eligible for Medi-Cal.

²⁷ "Eligible individuals," refers to eligible individuals, who selected a QHP.

²⁸ Percentages are calculated as a proportion of the total enrollees who reported their language and rounded to nearest whole number.

DEMOGRAPHICS OF ELIGIBLE INDIVIDUALS (ETHNICITY)

Ethnicity of Eligible Individuals Selecting a QHP (of Those Who Reported an Ethnicity) October 1, 2015 – December 31, 2015

Ethnicity ²⁹	Reporting Period: October - December 2015		Prior Reporting Period: April - September 2015		Prior Reporting Period: October - December 2014	
	Number of Eligible Individuals by Ethnicity	Percent of Eligible Individuals by Ethnicity ³⁰	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	29,750	15	21,395	14	30,091	25
Mexican/Mexican American/Chicano	22,436	75	16,535	77	24,245	81
Other	5,508	19	3,927	18	4,720	16
Mixed Ethnicity	493	2	403	2	509	<1
Puerto Rican	1,088	4	332	2	413	<1
Cuban	225	1	198	1	204	<1
Hispanic – ethnic origin not reported	4,299	2	3,867	3	4,013	3
Not Hispanic	100,869	50	77,260	51	87,044	72
Ethnicity not reported	66,905	33	48,392	N/A	63,378	N/A
Total	201,823	N/A	150,914	N/A	184,526	N/A

Source: CalHEERS

- A total of 134,918 eligible individuals, who selected QHPs (67 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, 52 percent identified as Hispanic (page 19); and
- 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.

²⁹ 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.

³⁰ 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.

DEMOGRAPHICS OF ELIGIBLE INDIVIDUALS (WRITTEN LANGUAGE)

Primary Written Language of Eligible Individuals Selecting a QHP (of Those Who Reported a Primary Written Language) October 1, 2015 – December 31, 2015

Primary Written Language ³¹	Reporting Period: October - December 2015		Prior Reporting Period: April – September 2015		Prior Reporting Period: October – December 2014	
	Number of Eligible Individuals by Language	Percent of Eligible Individuals by Language ³²	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	157,001	87	118,560	88	137,582	84
Spanish	15,495	9	10,363	8	18,305	11
Traditional Chinese character	4124	2	2,907	2	4,403	3
Korean	2,079	1	1,382	1	2,181	1
Vietnamese	1,001	1	870	1	1,186	1
Mandarin	510	<1	<20	<1	<20	<1
Cantonese	155	<1	<20	<1	<20	<1
Russian	146	<1	80	<1	79	<1
Tagalog	93	<1	60	<1	118	<1
Farsi	88	<1	81	<1	75	<1
Arabic	65	<1	36	<1	66	<1
Cambodian	30	<1	23	<1	30	<1
Armenian	28	<1	<20	<1	26	<1
Hmong	<20	<1	<20	<1	<20	<1
Not Reported	20,999	N/A	16,528	N/A	20,471	N/A
Total	201,823	N/A	150,914	N/A	184,526	N/A

Source: CalHEERS

- A majority of eligible individuals, who selected QHPs, indicated English as their primary written language (87 percent), with notable groups preferring written communication in Spanish (9 percent) or traditional Chinese characters (2 percent); and
- 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 (page 20), including those found eligible for Medi-Cal, 72 percent preferred English and 25 percent preferred Spanish for written communication.

³¹ “Eligible individuals,” refers to eligible individuals, who selected a QHP.

³² Percentages are calculated as a proportion of the total enrollees, who reported their language and rounded to nearest whole number.

DEMOGRAPHICS OF ELIGIBLE INDIVIDUALS (SPOKEN LANGUAGE)

Primary Spoken Language of Eligible Individuals Selecting a QHP (of Those Who Reported a Primary Spoken Language) October 1, 2015 – December 31, 2015

Primary Spoken Language ³³	Reporting Period: April – September 2015		Prior Reporting Period: January – March 2015		Prior Reporting Period: October – December 2014	
	Number of Eligible Individuals by Language	Percent of Eligible Individuals by Language ³⁴	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	156,459	86	118,517	87	136,178	83
Spanish	15,968	9	10,829	8	18,657	11
Mandarin	3,920	2	2,115	2	3,158	2
Korean	2,189	1	1,449	1	2,319	1
Cantonese	1,609	1	1,423	1	1,918	1
Vietnamese	1,227	1	1,097	1	1,413	1
Tagalog	211	<1	143	<1	246	<1
Russian	170	<1	111	<1	115	<1
Arabic	113	<1	68	<1	97	<1
Farsi	108	<1	102	<1	99	<1
Armenian	58	<1	34	<1	43	<1
Cambodian	56	<1	36	<1	46	<1
Hmong	27	N/A	<20	<1	<20	<1
Not Reported	19,708	N/A	14,982	N/A	20,227	N/A
Total	201,823	N/A	150,914	N/A	184,526	N/A

Source: CalHEERS

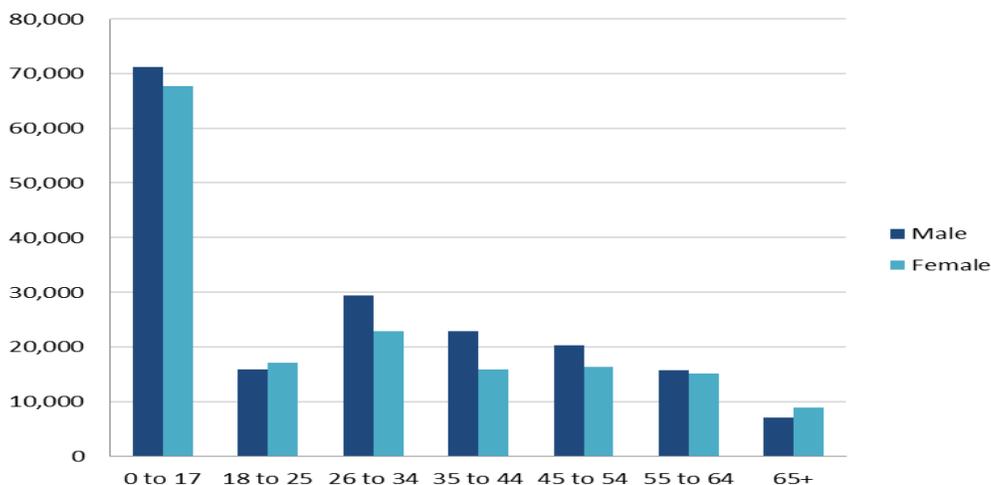
- A majority of eligible individuals, who selected QHPs, indicated English as their primary spoken language (86 percent), with notable minorities preferring Spanish (9 percent) or Mandarin (2 percent); and
- English language preference was more dominant among eligible individuals, who selected a QHP, as compared to the overall pool of applicants received through CalHEERS. Across all applicants through CalHEERS in the reporting period (pg.21), including those found eligible for Medi-Cal, 68 percent preferred English and 38 percent preferred Spanish for spoken communication.

³³ "Eligible individuals," refers to eligible individuals, also selected a QHP.

³⁴ Percentages are calculated as a proportion of the total enrollees who reported their language and rounded to nearest whole number.

DEMOGRAPHICS OF ELIGIBLE INDIVIDUALS (GENDER, AGE)

Age and Gender of Individuals Eligible for Medi-Cal October 1, 2015 – December 31, 2015



Source: MEDS

- Approximately 139,000 children and youth (ages 0 to 17) and about 33,000 young adults (ages 18 to 25) were determined eligible for Medi-Cal coverage; and
- Among individuals, who are eligible for Medi-Cal, the largest share were ages of 0 -17, are about the same as the previous reporting periods.

Age, Gender ³⁵	Reporting Period: October - December 2015		Prior Reporting Period: April - September 2015		Prior Reporting Period: October - December 2014	
	Number of Eligible Individuals	Percent of Eligible Individuals ³⁶	Number of Eligible Individuals	Percent of Eligible Individuals	Number of Eligible Individuals ³⁷	Percent of Eligible Individuals
0 to 17	138,849	40	293,896	40	218,765	31
18 to 25	32,948	10	67,965	9	113,519	16
26 to 34	52,315	15	109,278	15	119,906	17
35 to 44	38,628	11	82,827	11	92,801	13
45 to 54	36,607	11	76,098	10	84,610	12
55 to 64	30,890	9	62,076	9	61,515	9
65+	15,932	5	36,865	5	19,650	3
Male	182,370	53	385,390	53	351,323	49
Female	163,799	47	343,615	47	359,457	51

Source: MEDS

³⁵ 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.

³⁶ The Percentage of Eligible Individuals is rounded to nearest whole number.

Applications → Applicants → Eligibility Determination → Enrollment → Renewal

DEMOGRAPHICS OF ELIGIBLE INDIVIDUALS (RACE/ETHNICITY)

Race/Ethnicity of Individuals (of Those Who Reported Race/Ethnicity) Eligible for Medi-Cal October 1, 2015 – December 31, 2015

Race	Reporting Period: October – December 2015		Prior Reporting Period: April – September 2015		Prior Reporting Period: October – December 2014	
	Number of Eligible Individuals by Race	Percent of Eligible Individuals by Race ³⁸	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	92,407	36	212,917	39	283,995	47
White	69,142	27	146,335	27	154,056	25
Black	16,283	6	38,393	7	45,507	7
Other	26,298	10	47,347	9	40,262	7
Other Asian or Pacific Islander	17,376	7	34,680	6	27,628	5
Filipino	7,860	3	16,765	3	14,423	2
Chinese	8,973	4	17,347	3	14,707	2
Vietnamese	5,869	2	10,917	2	10,954	2
Asian Indian	3,541	1	7,466	1	5,616	1
Korean	2,821	1	5,585	1	4,932	1
Alaskan Native or American Indian	940	<1	2,448	<1	3,177	1
Cambodian	431	<1	997	<1	1,291	<1
Samoan	354	<1	896	<1	998	<1
Laotian	313	<1	768	<1	1,001	<1
Japanese	719	<1	1,273	<1	1,140	<1
Hawaiian	242	<1	576	<1	564	<1
Guamanian	138	<1	328	<1	269	<1
Armenian	51	<1	99	<1	92	<1
Unknown	1,983	N/A	4,237	N/A	3,665	N/A
Not Reported	90,428	N/A	179,631	N/A	96,503	N/A
Total	346,169	N/A	729,005	N/A	710,780	N/A

Source: MEDS

- About 253,750 individuals determined eligible for Medi-Cal during October – December 2015 indicated their race/ethnicity; and
- Of these individuals, 36 percent were Hispanic, 27 percent were White, and 6 percent were Black. Among all applicants through CalHEERS, 52 percent identified as Hispanic (pg. 19).

³⁸ Percentages are calculated as a proportion of the total enrollees who reported their language and rounded to nearest whole number.

DEMOGRAPHICS OF ELIGIBLE INDIVIDUALS (LANGUAGE)

Primary Language of Individuals (of Those, Who Reported a Primary Language) Eligible for Medi-Cal October 1, 2015 – December 31, 2015

Primary Language	Reporting Period: October – December 2015		Prior Reporting Period: April – September 2015		Prior Reporting Period: October – December 2014	
	Number of Eligible Individuals by Language	Percent of Eligible Individuals by Language ³⁹	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	226,031	67	475,633	65	478,059	68
Spanish	90,236	27	196,942	30	190,176	27
Vietnamese	4,061	1	7,594	1	6,874	1
Mandarin	3,416	1	6,923	1	4,866	1
Cantonese	2,878	1	5,939	1	5,108	1
Other Non-English	2,178	<1	3,727	<1	2,550	<1
Arabic	1,783	<1	3,353	<1	2,327	<1
Korean	1,533	<1	3,063	<1	2,754	<1
Armenian	1,445	<1	2,729	<1	1,910	<1
Tagalog	1,295	<1	2,683	<1	2,011	<1
Farsi	1,513	<1	2,391	<1	1,817	<1
Russian	1,064	<1	2,166	<1	1,604	<1
Other Chinese Languages	516	<1	1,032	<1	741	<1
Hmong	222	<1	560	<1	768	<1
Cambodian	177	<1	380	<1	477	<1
Portuguese	105	<1	242	<1	136	<1
Lao	81	<1	201	<1	232	<1
Thai	78	<1	136	<1	106	<1
French	73	<1	129	<1	95	<1
Japanese	62	<1	124	<1	85	<1
Samoan	57	<1	123	<1	137	<1
American Sign Language (ASL)	30	<1	92	<1	79	<1
Turkish	29	<1	52	<1	22	<1
Other Sign Language	30	<1	46	<1	37	<1
Hebrew	<20	<1	31	<1	<20	<1
Ilocano	<20	<1	25	<1	<20	<1
Mien	<20	<1	21	<1	<20	<1
Polish	<20	<1	<20	<1	<20	<1
Italian	<20	<1	<20	<1	<20	<1
Unknown	2,375	N/A	4,639	N/A	3,826	N/A
Not Reported	4,849	N/A	7,994	N/A	3,880	N/A
Total	346,169	N/A	729,005	N/A	710,780	N/A

Source: MEDS

³⁹ Percentages are calculated as a proportion of the total enrollees, who reported their language and rounded to nearest whole number.

Applications → Applicants → Eligibility Determination → Enrollment → Renewal

HEALTH PLAN ENROLLMENT

Data Sources and Methods

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. On page 33, Oscar Health Plan of California and United Healthcare Benefits Plan of California are two new QHP health insurance companies. Oscar and United Healthcare, are being offered in select areas of the state and were added to increase consumer choice in key areas of the state, but also because of their collaboration with providers to offer consumers integrated care models of delivery.

On page 36, “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.

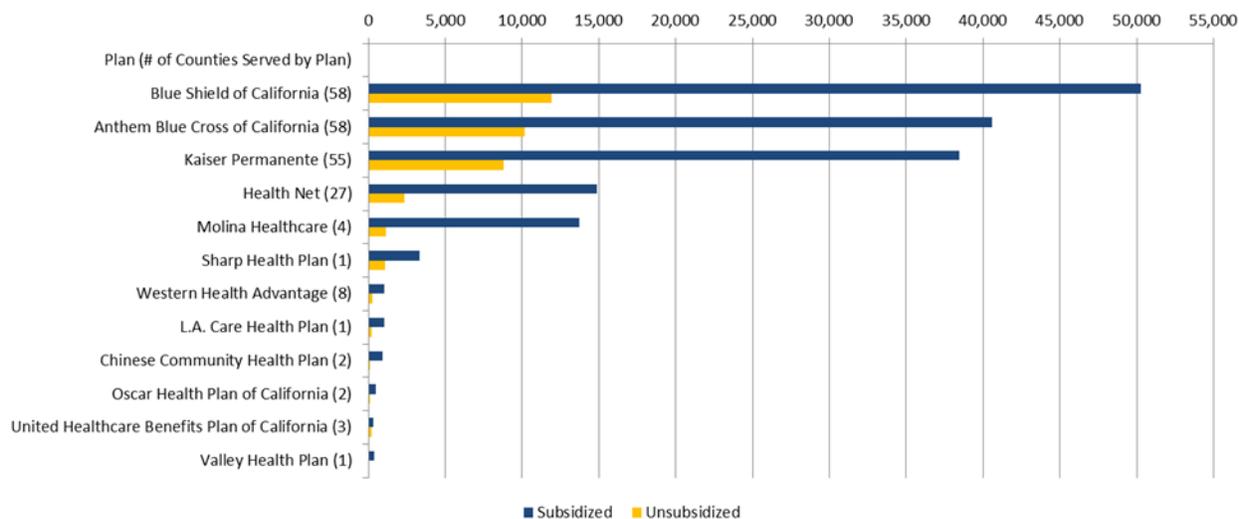
Medi-Cal beneficiaries are enrolled in either a contracted MCP or in FFS Medi-Cal. Beneficiaries in 35 counties have a choice between two or more MCPs.⁴⁰ Beneficiaries in one county have the choice of a MCP or FFS. For beneficiaries in these counties, who do not select their MCP within 30–45 days, and 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 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 183,400 Medi-Cal beneficiaries were covered under FFS during the reporting period.

⁴⁰ 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 October 1, 2015 – December 31, 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, increased during this reporting period relative to the prior reporting period;
- Blue Shield of Community and Anthem Blue Cross of California were the most frequently selected QHPs; and
- 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 October 1, 2015 – December 31, 2015

Health Plan (Number of Counties)	Reporting Period: October – December 2015		Prior Reporting Period: April – September 2015		Prior Reporting Period: October – December 2014	
	Number of Eligible Individuals	Percent of Eligible Individuals	Number of Eligible Individuals	Percent of Eligible Individuals	Number of Eligible Individuals	Percent of Eligible Individuals
Blue Shield of Community (58)	62,214	31	35,336	23	43,780	24
Anthem Blue Cross of California (58)	50,769	25	39,632	26	53,517	29
Kaiser Permanente (55)	47,254	23	44,169	29	46,635	25
Health Net (27)	17,224	9	23,973	16	31,257	1
Molina Healthcare (4)	14,854	7	2,668	2	3,231	2
Sharp Health Plan (1)	4,394	2	2,378	2	2,839	2
Western Health Advantage (8)	1,291	1	804	1	798	<1
L.A. Care Health Plan (1)	1,264	1	887	1	1,277	1
Chinese Community Health Plan (2)	1,003	<1	778	1	947	1
Valley Health Plan (1)	602	<1	289	<1	245	<1
United Healthcare (3)	501	<1	N/A	N/A	N/A	N/A
Oscar Healthcare (2)	453	<1	N/A	N/A	N/A	N/A
Total	201,823	N/A	150,914	N/A	184,526	N/A

Source: CalHEERS

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

HEALTH PLAN ENROLLMENT (COVERED CALIFORNIA HEALTH PLANS)

**Covered California QHP Enrollment by Rating Region
October 1, 2015 – December 31, 2015**

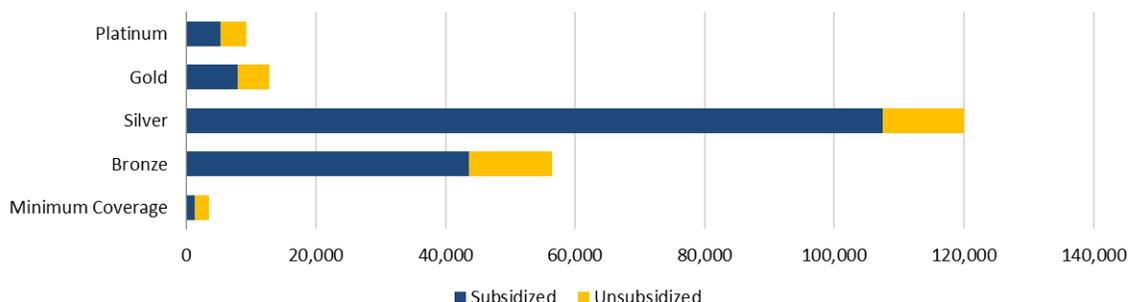


Source: CalHEERS

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>.

HEALTH PLAN ENROLLMENT (COVERED CALIFORNIA)

Covered California QHP Enrollment by Metal Tier, October 1, 2015 – December 31, 2015



Source: CalHEERS

- Silver plans remained the most frequently selected among subsidized enrollees. 26 percent selected bronze plans, about the same as the prior reporting periods; and
- Among unsubsidized enrollees, silver and bronze plans continued to be the most frequently selected (69 percent). More eligible individuals selected gold or platinum plans (24 percent) and fewer individuals selected minimum coverage (6 percent) as compared to the prior reporting periods.

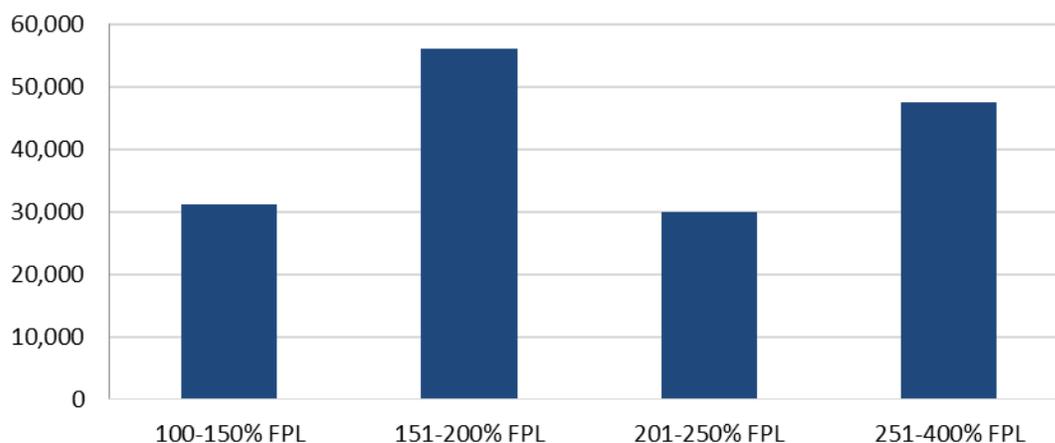
Program Eligibility	Reporting Period: October – December 2015		Prior Reporting Period: April – September 2015		Prior Reporting Period: October – December 2014	
	Number of Eligible Individuals	Percent of Eligible Individuals	Number of Eligible Individuals	Percent of Eligible Individuals	Number of Eligible Individuals	Percent of Eligible Individuals
Subsidized Coverage						
Platinum	5,268	3	4,792	4	6,280	4
Gold	7,855	5	6,009	5	8,208	5
Silver	107,471	65	76,747	66	105,564	67
Bronze	43,540	26	28,219	24	37,446	24
Minimum Coverage	1,238	1	684	1	N/A	N/A
Total	165,372	N/A	116,451	N/A	157,498	N/A
Unsubsidized Coverage						
Platinum	3,986	11	4,598	13	3,820	14
Gold	4,892	13	4,628	13	3,379	13
Silver	12,455	34	11,083	32	8,367	31
Bronze	12,848	35	11,986	35	9,539	35
Minimum Coverage	2,270	6	2,168	6	1,923	7
Total	36,451	N/A	34,463	N/A	27,028	N/A

Source: CalHEERS

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

HEALTH PLAN ENROLLMENT (COVERED CALIFORNIA)

Covered California Subsidized QHP Enrollees by FPL October 1, 2015 – December 31, 2015



Source: CalHEERS

Not shown are 736 Medi-Cal ineligible enrollees with incomes <100 percent 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 percent FPL.

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

Percentage FPL ⁴¹	Reporting Period: October – December 2015		Prior Reporting Period: April – September 2015		Prior Reporting Period: October – December 2014	
	Number of Eligible Individuals	Percentage of Eligible Individuals	Number of Eligible Individuals	Percentage of Eligible Individuals	Number of Eligible Individuals	Percentage of Eligible Individuals
100 to 150 % FPL	31,183	19	25,356	22	26,936	17
151 to 200 % FPL	56,060	34	37,585	32	53,167	34
201 to 250 % FPL	29,980	18	20,832	18	30,681	30
251 to 400 % FPL	47,413	29	31,864	27	46,104	29
Other ⁴²	736	<1	814	1	610	<1
Total	165,372	N/A	116,451	N/A	157,498	N/A

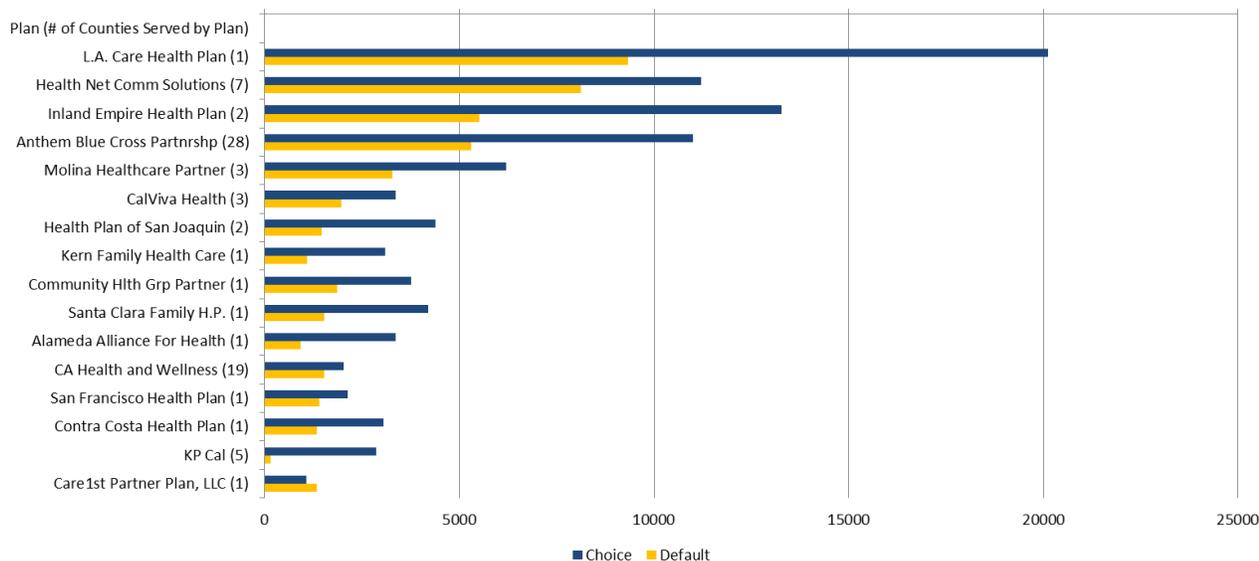
Source: CalHEERS

⁴¹ “Eligible individuals,” refers to eligible individuals, who selected a QHP.

⁴² 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.

HEALTH PLAN ENROLLMENT (MEDI-CAL HEALTH PLANS)

New Enrollment in Medi-Cal Managed Care Health Plans October 1, 2015 – December 31, 2015



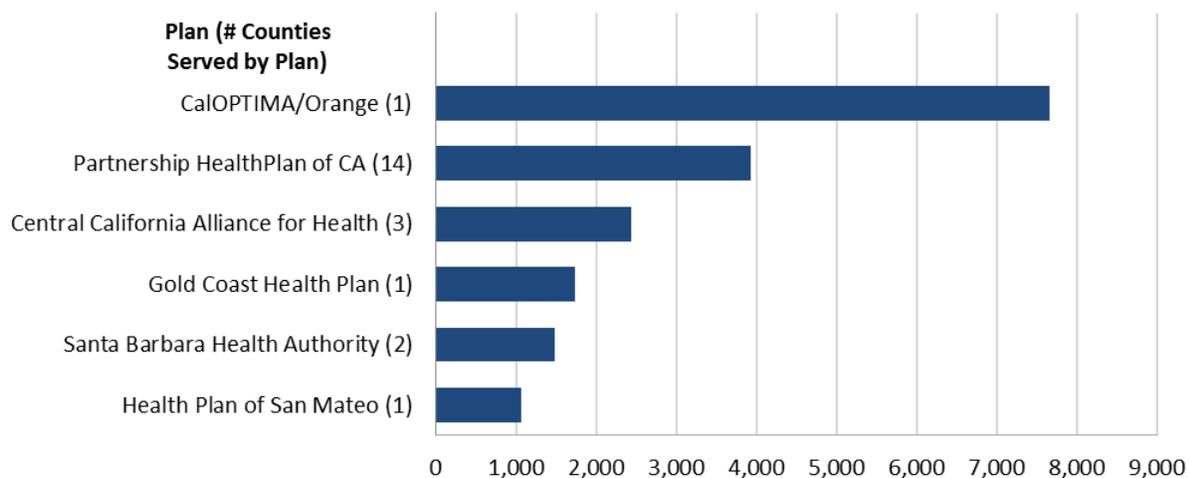
Source: Health Care Options

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; and
- 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 95,000 chose and were enrolled in a MCP during the reporting period; while approximately another 46,000 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.
 - Eligible beneficiaries enrolled during the reporting period without record of whether the enrollment was a selection or a default; and
 - Individuals enrolled in a COHS plan. COHS plan enrollment data is reported on page 39.

HEALTH PLAN ENROLLMENT (MEDI-CAL HEALTH PLANS)

New Enrollment in COHS Health Plans October 1, 2015 – December 31, 2015



Source: MEDS

- From October – December 2015, just over 18,000 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 is no new data on QHP renewals in this reporting period. As data become available, the next quarterly report will incorporate QHP renewals data.

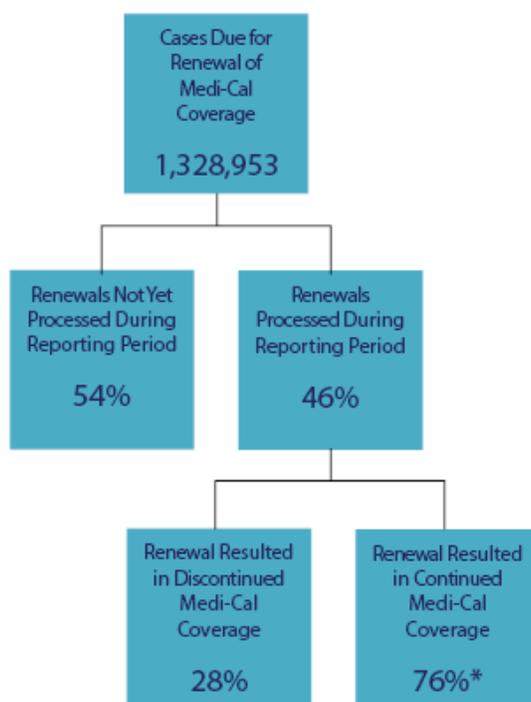
Data on Medi-Cal renewals are from the three SAWS consortia. Unlike renewal of QHP coverage through Covered California, Medi-Cal renewals take place throughout the year. Each beneficiary must renew eligibility on an annual basis, and their renewal date is based on their initial eligibility determination 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.

This data, reported by SAWS, captures processing activities performed up to and including the month in which the Medi-Cal renewal is due. The numbers reflected are case-level counts, not individuals. The counts represent Medi-Cal renewals that were fully processed, which resulted in an eligibility determination; as well as cases that were not processed by the end of the renewal due month, which indicates processing activity and/or system resolution continued beyond the renewal month.

"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. "Processed, Resulting in Continued Medi-Cal" reflects only those cases that remained Medi-Cal eligible. The difference between these includes discontinuances and/or whole cases that transitioned to Covered CA coverage. "Not Processed" reflects cases where necessary data entries were not complete and/or the case was unable to be coded correctly in the system to reflect a fully processed renewal. This includes cases where the county has worked on the case, but is unable to complete the renewal process or complete the renewal process so that it is reflected in SAWS as a completed renewal. Reasons include system errors; manual workarounds, that resulted in cases showing as not processed; administrative verification needed to override federal hub verification results, as appropriate; or renewals processed manually. In some cases, it may be due to incomplete data being entered into the system and cases pending Long Term Negative Action functionality. Additionally, this number reflects counties' ongoing work with beneficiaries, who are making good faith efforts in providing what is needed to complete their renewal.

MEDI-CAL COVERAGE RENEWALS – CASE LEVEL

- For Medi-Cal renewals due⁴³ October – December 2015, 46 percent were processed⁴⁴ and 76 percent of those resulted in continued Medi-Cal coverage⁴⁵. In the second and third quarter of 2015, 81 percent of processed renewals resulted in continued Medi-Cal coverage; and
- Note that a case may include more than one individual in a family. Renewals do include individuals enrolled in Medi-Cal through their receipt of SSI, CalWORKs, and Foster Care.



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

Source: SAWS

Note: See page 40 for additional details.

⁴³ This data, reported by SAWS, captures processing activities performed up to and including the month in which the Medi-Cal renewal is due. The numbers reflected are case-level counts, not individuals.

⁴⁴ "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.

⁴⁵ "Processed, Resulting in Continued Medi-Cal" reflects only those cases that remained Medi-Cal eligible.

APPEALS

Data Sources and Methods

Eligibility appeals for both Covered California and Medi-Cal are processed and adjudicated by Administrative Law Judges and CDSS through contract 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 children 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 October and December 2015.

APPEALS

Eligibility Actions Appealed October 1, 2015 – December 31, 2015

Program	Denial of Coverage	Eligibility Determination	Discontinuance
Covered California QHPs	1,335	123	351
Covered California & Medi-Cal	1,166	378	101
Medi-Cal	747	207	111
Total During October – December 2015	3,248	708	563
Prior Reporting Period April – September 2015	6,276	1,713	986
Prior Reporting Period October – December 2014	1,397	132	424

Source: CDSS

- Between October and December 2015, a total of 4,519 appeals were filed by Covered California and Medi-Cal applicants; and
- Of these, 72 percent were appeals regarding denials of eligibility, 16 percent were regarding eligibility determinations, and 12 percent were regarding discontinuances from existing coverage.

Hearing Results October 1, 2015 – December 31, 2015

Program	Granted	Granted in Part	Denial of Appeal	Withdrawals/Dismissals
Covered California QHPs	325	71	150	360
Covered California and Medi-Cal	186	136	57	198
Medi-Cal	125	18	24	255
Total October – December 2015	636	225	231	813
Prior Reporting Period April – September 2015	1,429	437	268	5,819
Prior Reporting Period October – December 2014	478	75	112	1,020

Source: CDSS

- Between October and December 2015, 45 percent of appeals were granted or granted in part and 12 percent were denied. The remaining 43 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 October – December 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 those:

- In the process of becoming eligible, but have not yet completed enrollment;
- With an unmet monthly share-of-cost obligation;
- In the California Family Planning, Access, Care, and Treatment Program, and
- 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, which 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 October 1, 2015, and December 31, 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.

Applications → Applicants → Eligibility Determination → Enrollment → Renewal

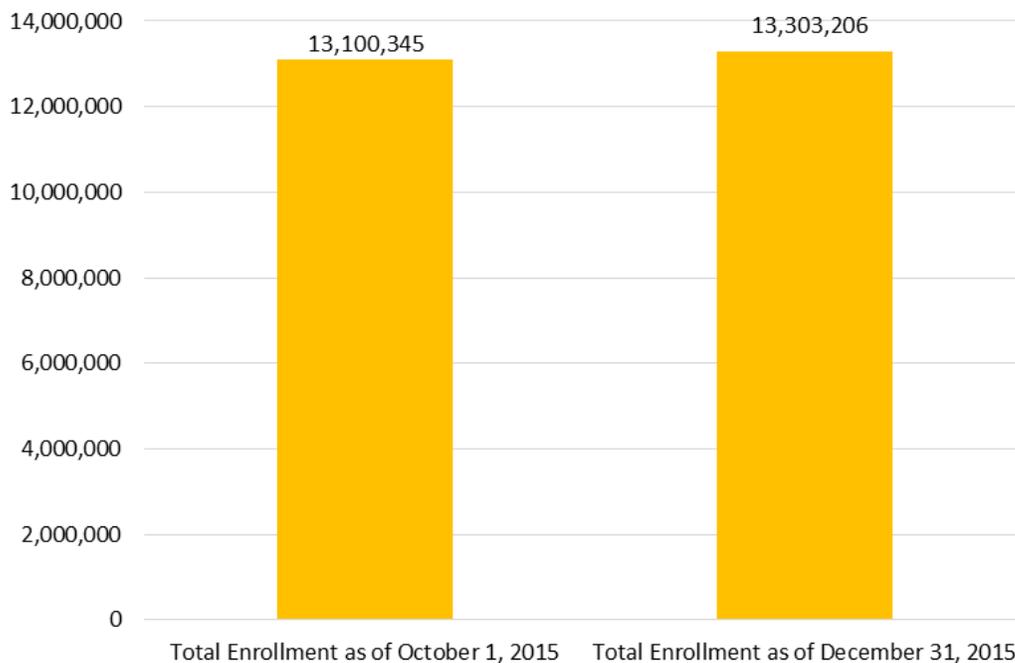
TOTAL ENROLLMENT IN MEDI-CAL AND QHP

Data Sources and Methods

DHCS and Covered California continue to strive towards improving the timeliness and accuracy of 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 October 1, 2015 and December 31, 2015



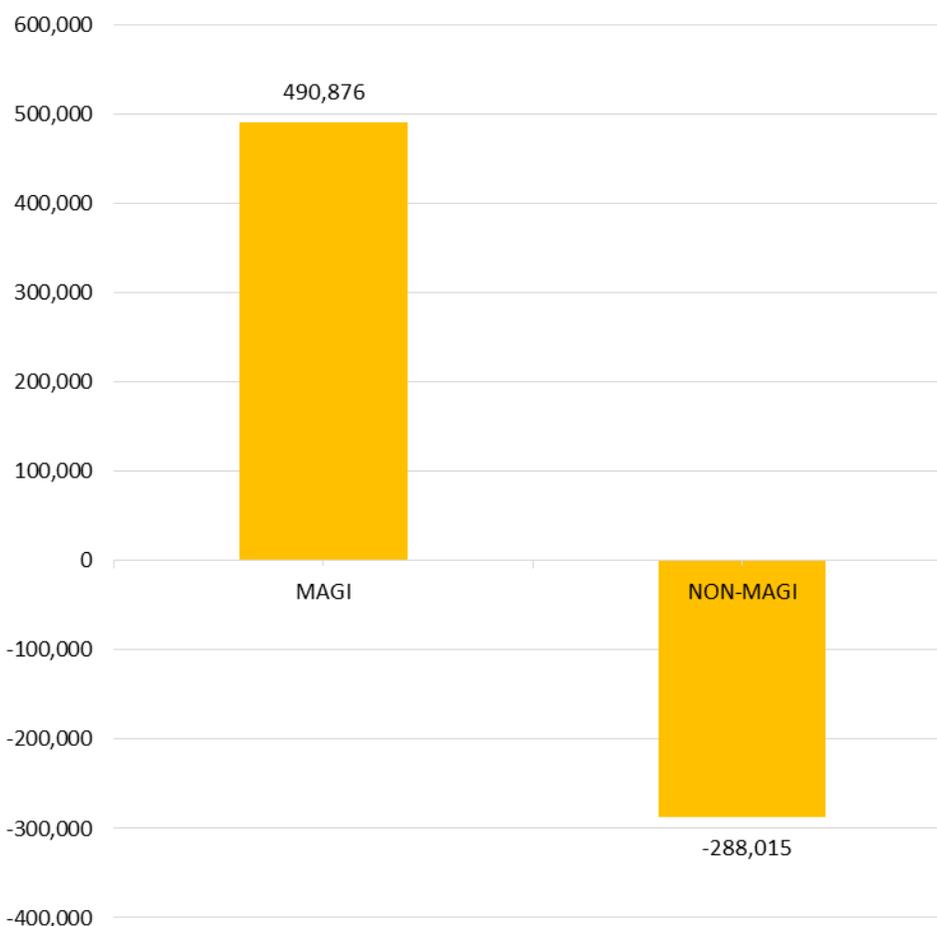
Source: Analysis by DHCS –RASD

- Between October 1, 2015, and December 31, 2015, total Medi-Cal enrollment increased by 202,861 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 October 1, 2015 – December 1, 2015



Source: Analysis by DHCS –RASD

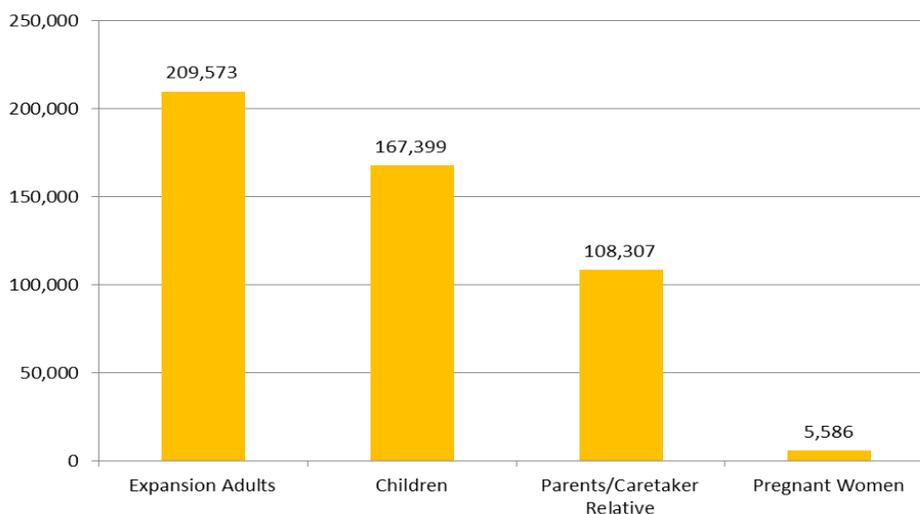
- The number of individuals enrolled in MAGI Medi-Cal increased by about 490,800 between October 1, 2015, and December 31, 2015; and
- Conversely, enrollment under non-MAGI aid codes dropped by roughly 288,000 during this same period. A summary of non-MAGI enrollment by category is shown on page 48.

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 October 1, 2015 - December 31, 2015



Source: Analysis by DHCS-RASD

- During this reporting period, the number of individuals eligible under MAGI aid codes increased by about 491,000. 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; and
- 34 percent of this increase came from children. Expansion adults represented a larger proportion of MAGI enrollments this reporting period (43 percent) as compared to the prior reporting period (29 percent).

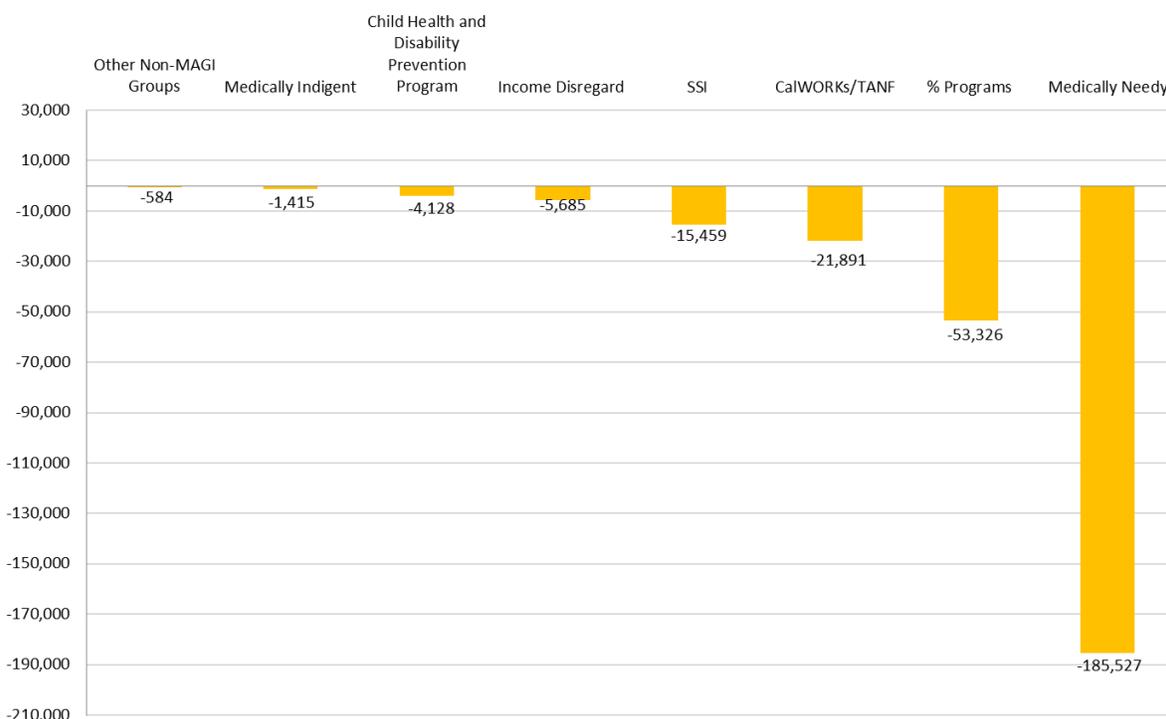
Program Eligibility	Reporting Period: October – December 2015		Prior Reporting Period: April – May 2015		Prior Reporting Period: October – December 2014	
	Change in Number of Eligible Individuals	Percent of Eligible Individuals	Change in Number of Eligible Individuals	Percent of Eligible Individuals	Change in Number of Eligible Individuals	Percent of Eligible Individuals
Expansion Adults	209,573	43	393,012	29	276,927	41
Children	167,399	34	623,546	47	247,810	37
Parents/Caretaker Relatives	108,307	22	314,387	23	145,306	22
Pregnant Women	5,586	1	9,705	1	3,895	1
Total	490,865	N/A	1,340,650	N/A	673,938	N/A

SOURCE: DHCS RASD

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 October 1, 2015 – December 31, 2015



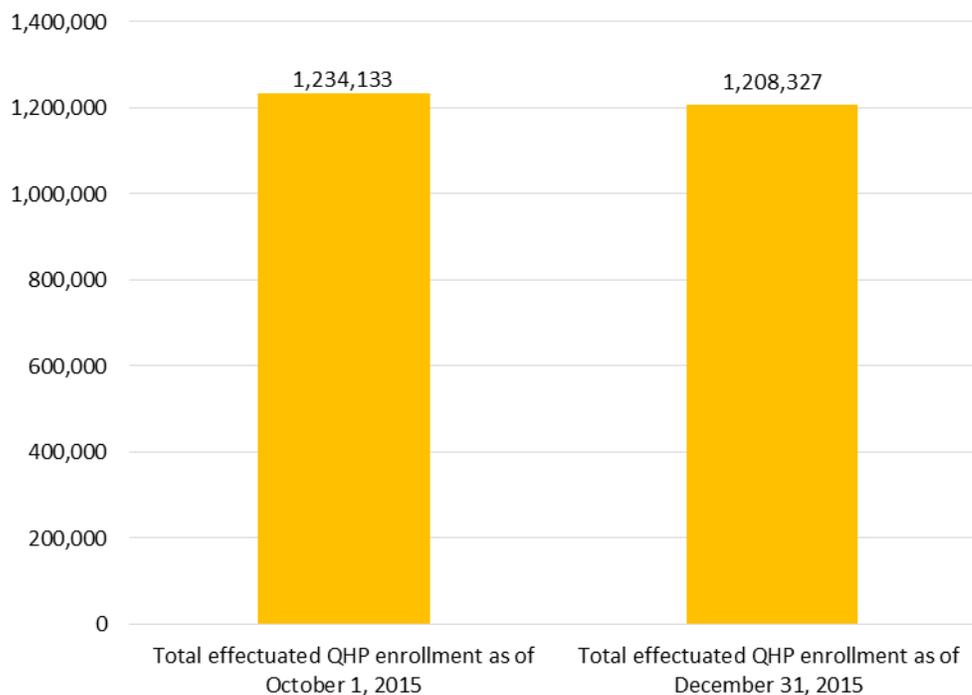
Source: Analysis by DHCS-RASD

Note: "Other Non-MAGI groups," includes Breast Cancer and Cervical Cancer Treatment Program, and Refugee Entrant. "% Programs," refers to the following Pre-ACA non-MAGI groups: 100 percent FPL, 133 percent FPL, and the Low Income Health Program. "Medically Needy," includes 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; and
- Between October 1, 2015, and December 31, 2015, the number of individuals eligible under non-MAGI aid codes decreased by 288,000.

TOTAL EFFECTUATED ENROLLMENT – COVERED CA QHPs

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



Source: CalHEERS

- Comparing data for October 1, 2015, and December 31, 2015, total effectuated QHP enrollment decreased by 2 percent, or 25,806 individuals. This net change in effectuated QHP enrollment reflects both new enrollments and dis-enrollments as individuals exit QHP coverage; and
- 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

- Page 4 of the previous report indicated an incorrect percentage of applications for those determined eligible for Covered CA QHPs filed with assistance for April – September 2015. Please see page 4, bullet six for correct percentage of applications filed with assistance for prior reporting;
- Page 4 of the previous report indicated an incorrect percentage of all applications received through County Human Services Agency Offices, who were initiated in person for April – September 2015. Correct percentage is 27 percent; and
- Page 41 of the previous report indicated a wrong statement that renewals do not include individuals enrolled in Medi-Cal through their receipt of SSI, CalWORKs, and Foster Care. Renewals data does include individuals enrolled in Medi-Cal through their receipt of SSI, CalWORKs and Foster Care.