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General Overview

With the Data Forms found in this section, each local program is able to evaluate its program needs, performance, and trends. The number of children eligible for CMS services [CCS Caseload, CHDP Target Population, and Health Care Program for Children in Foster Care (HCPCFC) Caseload], the level of CHDP referrals assist local program to reflect on the impact of their program on children's health and the trends of program participation.

I. CCS Caseload Summary

The data collected on this form are used to report the actual CCS caseload and demonstrate trends in the caseload over time. (See page 4)

Additional Data

Additional data are used to evaluate the staffing requirements for the CHDP and HCPCFC programs.

- The following CHDP Reports are available online through the **Business Objects Reporting System** (<http://www.dhcs.ca.gov/services/chdp/Pages/BusinessObjects.aspx>). For information on accessing the system, contact CMS Information Technology Services Section and request Business Objects support.
 - *CHDP Annual Summary of Screens by Funding Source For Fiscal Year*
 - *CHDP Monthly Summary of Screens by Funding Source For Month of XX-200X*
 - *CHDP Provider Claims and Amounts Paid by County and Funding Source*
 - *Active CHDP Providers by County and Provider Name*
- The CHDP Target Population estimate is from CMS.
 - *CHDP Target Population Estimate for Fiscal Years 2008-09, 2009-10, and 2010-11.*
- Data regarding children in out of home placement are from the California Department of Social Services, Research and Development Division:
 - Monthly reports available online at

<http://www.cdss.ca.gov/research/PG299.htm>

CWS/CMS1 – Child Welfare Services/Case Management System-Foster Care Children by Placement

This report includes information by placement in-county, out-of-county, and out-of-state.

CWS/CMS2 – Child Welfare Services/Case Management System – Characteristics of Children in Out-of-Home Care

This report provides information on the characteristics of the children in out-of-home placement, including age, gender, ethnicity, type of placement home, funding source, agency responsible, number of cases that were terminated and reason for termination.

- HCPCFC Average Annual Caseload (see page 20).

California Children's Services Caseload Summary Instructions

The purpose of submission of the CCS Caseload Summary is to demonstrate the caseload count changes in the county CCS program during the three previous fiscal years. The CCS Caseload Summary demonstrates CCS county workload activity on all cases, whether determined CCS eligible or not. The CCS Caseload Summary shows program participation (Medi-Cal and non Medi-Cal -- non Medi-Cal caseload includes Healthy Families and all other CCS cases) and is defined as the number of all open (active) CCS cases plus the number of potential CCS cases.

Calculation of Eligible Months and Reporting as Caseload

Beginning in Fiscal Year (FY) 2006-07, the terminology for caseload changed to "eligible months". However, the word "caseload" will be seen throughout the PF&G manual as this is the terminology that is most familiar to the previous users of this manual.

Caseload in FY 2009-2010 will be calculated based on the months the client was eligible for services. Below are examples of types of cases for which a child would be counted as an eligible month:

- If a child has Medi-Cal in a month, that child has an eligible month as a California Children's Services (CCS)/Medi-Cal client.
- If a child is a Healthy Families (HF) subscriber on any day in the month, the child has an eligible month as a CCS/HF client. However, HF will only pay for the dates of service in the month for which the child is actually a HF subscriber.
- If a child has CCS only eligibility on any day in the month, then the child has an eligible month as a CCS-only client. However, CCS-only will only pay for a date of service in the month for which the child has CCS-only eligibility.

There are two reports that can be accessed to calculate "eligible months" for caseload. There is one report in CMS Net Legacy titled "Monthly Caseload Count Report" (for Medi-Cal and Non Medi-Cal counts), and the second report is in Business Objects (BO) titled "Healthy Families Caseload Count Report". In the CMS Net Legacy report, the non-Medi-Cal count is both HF and CCS together. Counties need to subtract FH from the total to get the CCS population.

The CMS Net Legacy report has a history so the report "Monthly Caseload Count Report" (Medi-Cal and non-Medi-Cal) can be processed whenever a county needs the information. However, the HF count in the Business Objects report "Healthy Families Caseload County" only contains information as of the prior day so it is critical for counties to run the report every month to get the HF totals if they want to use BO to retrieve the caseload counts.

This Computes Information Bulletin #167 provides more details regarding these reports. This Bulletin can be found at:

<http://www.dhcs.ca.gov/services/ccs/cmsnet/Pages/ThisComputes.aspx>

The eligible month information should be retrieved for each type of case for which a child would be counted, e.g. CCS/Medi-Cal, CCS/HF, and CCS-only. At the end of the three month period,

the total number of "eligible months" from the three combined reports would need to be divided by three to achieve the "average caseload" number for the quarter.

An example would be:

Month One = 150 eligible months

Month Two = 148 eligible months

Month Three = 167 eligible months

TOTAL 465 Eligible Months

465 eligible months ÷ 3 = 155 eligible months/caseload for the reporting quarter.

Beginning FY 2003-04, the CCS Caseload Form (Page 7) added Healthy Families cases along with Medi-Cal and Non Medi-Cal CCS to appropriately reflect program participation in the caseload. To assist counties in determining caseload using this format, the rows on the CCS Caseload Summary have been labeled using numbers 1 to 11, and the columns have been labeled using letters A to B.

To complete this report, caseload data are collected from the CCS Quarterly Administrative Invoices for each fiscal year to be reported. The four quarters of the fiscal year are totaled and divided by four to gain the yearly average CCS Caseload.

Caseload Determination (for each fiscal year requested)

1. Add the average open (active) caseload number for all quarterly invoices from the previous fiscal year and divide by four.
2. Determine the number of potential cases by:
 - a. An actual count of potential cases assigned a temporary number if the county CCS program is using CMS Net, or
 - b. An actual count of potential cases if the county CCS program has a method for assigning a temporary number when the county is not on CMS Net, or
 - c. An estimate of potential cases may be used based on the county's experience.
3. Medi-Cal

Add the average total open (average) caseload (row 1, column A) to the potential cases (row 2, column A) to get the Total Medi-Cal caseload (row 3, column A).
4. Non Medi-Cal
 - a. Add the average total open (active) caseload (row 4, column A) to the potential cases (row 5, column A) to get the Total Healthy Families caseload (row 6, column A). **NOTE:** Healthy Families data may not be available for some counties for one or more of the requested fiscal years, in which case use zeros.

- b. Add the average total open (active) caseload (row 7, column A) to the potential cases (row 8, column A) to get the Total Straight CCS (row 9, column A).
 - c. Add Total Healthy Families (row 6, column A) to the Straight CCS caseload (row 9, column A) to get the Total Non Medi-Cal caseload (row 10, column A).
5. Grand Total
- Add Total Medi-Cal (row 3, column A), to Total Non Medi-Cal (row 10, column A), and place the result in row 11, column A.
6. Determine the total Medi-Cal and Non Medi-Cal percentage split:
- a. Medi-Cal: Divide row 3, column A, by the Grand Total in row 11, column A. The resulting percentage is placed in row 3, column B.
 - b. Non Medi-Cal: Divide row 10, column A by the Grand Total in row 11, column A. The resulting percentage is placed in row 10, column B.
 - c. Add the percentages in row 3, column B added to row 10, column B and place the result in row 11, column B (will equal 100 percent).

California Children's Services Caseload Summary Form

County: _____

Fiscal Year: _____

CCS Caseload 0 to 21 Years		A		B			
		07-08 Actual Caseload	% of Grand Total	08-09 Actual Caseload	% of Grand Total	09-10 Estimated Caseload based on first three quarters	% of Grand Total
MEDI-CAL							
1	Average of Total Open (Active) Medi-Cal Children						
2	Potential Case Medi-Cal						
3	TOTAL MEDI-CAL (Row 1 + Row 2)						
NON MEDI-CAL							
Healthy Families							
4	Average of Total Open (Active) Healthy Families						
5	Potential Cases Healthy Families						
6	Total Healthy Families (Row 4 + Row 5)						
Straight CCS							
7	Average of Total Open (Active) Straight CCS Children						
8	Potential Cases Straight CCS Children						
9	Total Straight CCS (Row 7 + Row 8)						
10	TOTAL NON MEDI-CAL (Row 6 + Row 9)						
GRAND TOTAL							
11	(Row 3 + Row 10)						

Child Health and Disability Prevention (CHDP) Program Referral Data Instructions

The purpose of submission of the CHDP Program Referral Data is to report the results of referrals for information, medical/dental resources, scheduling appointments and arranging transportation to appointments and care coordination for children eligible for Early and Periodic Screening, Diagnosis, and Treatment (EPSDT)/CHDP services. Informing children and their families about the benefits of prevention and the health services and assistance available to them, helping children and their families use health resources and assuring that health problems found during screenings are diagnosed and treated early are critical activities in the CHDP Program.

California local Departments of Social Services provide basic information about EPSDT to recipients of Medi-Cal benefits. The information includes the importance of preventive health services and the assistance available to children and families through the CHDP Program. Departments of Social Services convey children and families' responses to this basic information and the need for more information and/or assistance. When children and families request more information about CHDP services, or help with making a medical and/or dental appointment and/or for assistance with scheduling the appointment and transportation to reach the appointment, the local department of social services sends a referral to the local CHDP program in the jurisdiction of the child's residence.

Data are reported on this form annually. Trends observed over the course of three fiscal years (FY) can be used to enhance collaboration with the Department of Social Services eligibility workers in the assurance of CHDP referrals, provide feedback to Managed Care Plan Liaisons, quantify the number of children getting follow-up care, and as an indicator of workload.

Data to Complete the Form

Complete this form using data that are currently available. Where data are not available, please attach an explanation. If your program collects any other data regarding the numbers and types of contacts made or attempted, or other measures of your workload and related outcome data, please attach this information in whatever format you currently gather it.

The most recent FY on the form is the FY prior to the FY of the Plan and Fiscal Guidelines (PFG). For example, when the PFG has been released with instructions and forms for FY 09-10, the most recent year on the CHDP Program Referral Data is FY 08-09. The reason for this is that the results of care coordination for a child with a date of service in a prior FY are often not reportable until after another FY has started.

1. Total number of CalWORKs/Medi-Cal cases informed and determined eligible by the Department of Social Services.

Request this number from the Department of Social Services on a monthly basis and compile annually. The CHDP – Social Services Interagency Agreement (see Section 5), describes the level and type of management information that will be compiled and shared between the departments (in Part IX. A).

The data are to reflect the total number of cases with eligible individuals less than 21 years of age, including a child not born but with an expected date for delivery. This number becomes a reference/denominator for the number of cases that are referred to the local CHDP Program reported in 2.

2. **Total number of cases and recipients requesting CHDP services.** Requests for CHDP services include referrals to CHDP for medical and/or dental services; and medical and/or dental services with scheduling and/or transportation assistance.
 - a. CalWORKs cases/recipients
 - b. Foster care cases/recipients
 - c. Medi-Cal only cases/recipients

This section shows how many cases and recipients resulted in a referral to CHDP by class of eligibility as a result of the basic information provided by Department of Social Services. Known as CalWORKs since 1996, the cases/recipients in CalWORKs have been referred to as “categorically needy” and are part of the Aid for Families with Dependent Children. The Medi-Cal only cases/recipients have been referred to as “medically needy”.

Complete the total number of cases and recipients requesting CHDP services from the CHDP Referral, Form PM 357. The Department of Social Services may also have this information in their data reports which would be identified in the CHDP – Social Services Interagency Agreement with the level and type of management information that will be compiled and shared between the departments.

Tracking the number of cases referred and by eligibility type provides information about the level of need for health care services information and referrals and the proportion of cases that are requesting CHDP services.

3. **Total number of EPSDT eligible recipients and unborn, referred by Department of Social Services workers** requesting:
 - a. Medical and/or dental services
 - b. Medical and/or dental services with scheduling and/or transportation
 - c. Information only (optional)

This section shows what kind of CHDP services have been requested by the eligible recipients.

Complete the total number of cases and recipients requesting CHDP services from the CHDP Referral, Form PM 357. The Department of Social Services may also have this information in their data reports which would be identified in the CHDP – Social Services Interagency Agreement with the level and type of management information that will be compiled and shared between the departments.

Tracking the number of recipients referred by type of service request provides information about the level of need for health care services information and referrals and the proportion of cases that are requesting CHDP services with scheduling and/or transportation assistance.

4. **Number of persons contacted by telephone, home visit, face-to-face, office visit, or written response to outreach letter.**

Complete the total number of recipients contacted by telephone, home visit, face-to-face, office visit, or written response to outreach letter. A successful contact is defined as a response that is received “face-to-face, ear-to-ear, or pen-to-pen” from the recipient.

If you gather other data such as the number of attempts before a successful contact is made, include that data as an addendum.

5. Total number of recipients actually provided scheduling and/or transportation assistance by program staff.

Include the information you record locally that shows the number of recipients provided scheduling and/or transportation assistance. This reflects the assistance you are able to provide that enables a recipient to have an appointment and the necessary transportation to make that appointment.

Note: A “good faith effort” has to be documented. *A good faith effort as referenced in the model Interagency Agreement, Section VII, includes at least one documented attempt to trace the person through local welfare departments by obtaining a current address and telephone number and to contact the family at their current address/telephone number.*

6. Total recipients provided assistance with scheduling and/or transportation who actually received medical and/or dental services

Of those recipients in “5”, include the total number who received medical services as confirmed by a Confidential Screening/Billing Report (PM 160) on file or provider certification of provision of service; and/or for dental services, family, provider, or child verification.

CHDP Program Referral Data

Complete this form using the Instructions found on page 4-8 through 4-10.

County/City:	FY 08-09		FY 09-10		FY 10-11	
Basic Informing and CHDP Referrals						
1. Total number of CalWORKs/Medi-Cal cases informed and determined eligible by Department of Social Services						
2. Total number of cases and recipients in "1" requesting CHDP services	Cases	Recipients	Cases	Recipients	Cases	Recipients
a. Number of CalWORKs cases/recipients						
b. Number of Foster Care cases/recipients						
c. Number of Medi-Cal only cases/recipients						
3. Total number of EPSDT eligible recipients and unborn, referred by Department of Social Services' workers who requested the following:						
a. Medical and/or dental services						
b. Medical and/or dental services with scheduling and/or transportation						

c. Information only (optional)						
4. Number of persons who were contacted by telephone, home visit, face-to-face, office visit, or written response to outreach letter						
Results of Assistance						
5. Number of recipients actually provided scheduling and/or transportation assistance by program staff						
6. Number of recipients in "5" who actually received medical and/or dental services						

**CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES
CHILDREN'S MEDICAL SERVICES
CHILD HEALTH AND DISABILITY PREVENTION (CHDP) PROGRAM
TABLE 2-2
CHDP FY 2008-2009 TARGET POPULATION ESTIMATE**

County	Medi-Cal Funded Under 21	Medi-Cal Funded Percent	State Funded Under 19	State Funded Percent	Total Children
ALAMEDA	95,739	71.4%	38,411	28.6%	134,149
ALPINE	91	69.8%	39	30.2%	130
AMADOR	1,594	62.8%	944	37.2%	2,538
BUTTE	22,598	71.3%	9,102	28.7%	31,700
CALAVERAS	2,327	59.8%	1,562	40.2%	3,889
COLUSA	2,491	62.9%	1,468	37.1%	3,959
CONTRA COSTA	56,749	68.1%	26,591	31.9%	83,340
DEL NORTE	3,679	74.1%	1,286	25.9%	4,965
EL DORADO	7,237	58.4%	5,145	41.6%	12,382
FRESNO	151,288	72.5%	57,487	27.5%	208,775
GLENN	3,638	62.8%	2,159	37.2%	5,797
HUMBOLDT	12,114	66.6%	6,072	33.4%	18,186
IMPERIAL	23,773	64.9%	12,876	35.1%	36,649
INYO	1,419	67.9%	671	32.1%	2,090
KERN	116,042	70.1%	49,542	29.9%	165,584
KINGS	17,828	63.0%	10,484	37.0%	28,312
LAKE	6,617	64.8%	3,602	35.2%	10,219
LASSEN	2,521	67.4%	1,220	32.6%	3,741
LOS ANGELES	1,146,306	69.2%	510,237	30.8%	1,656,543
MADERA	20,903	69.7%	9,088	30.3%	29,991
MARIN	7,234	64.7%	3,947	35.3%	11,181
MARIPOSA	1,148	61.5%	719	38.5%	1,867
MENDOCINO	10,063	70.6%	4,183	29.4%	14,246
MERCED	40,568	67.7%	19,366	32.3%	59,934
MODOC	969	70.2%	411	29.8%	1,380
MONO	668	54.7%	553	45.3%	1,221
MONTEREY	40,442	63.7%	23,061	36.3%	63,503
NAPA	6,324	60.0%	4,221	40.0%	10,545
NEVADA	3,834	56.1%	2,998	43.9%	6,832
ORANGE	194,030	62.2%	118,042	37.8%	312,072
PLACER	11,034	57.8%	8,044	42.2%	19,078
PLUMAS	1,126	63.1%	658	36.9%	1,784
RIVERSIDE	167,571	61.2%	106,026	38.8%	273,597
SACRAMENTO	143,459	69.9%	61,723	30.1%	205,182
SAN BENITO	4,443	61.4%	2,796	38.6%	7,239
SAN BERNARDINO	208,729	65.0%	112,161	35.0%	320,890
SAN DIEGO	182,511	60.3%	120,335	39.7%	302,846
SAN FRANCISCO	40,404	70.8%	16,649	29.2%	57,053
SAN JOAQUIN	78,953	68.1%	36,903	31.9%	115,856

Children's Medical Services Plan and Fiscal Guidelines

SAN LUIS OBISPO	13,897	63.5%	7,973	36.5%	21,870
SAN MATEO	28,912	67.1%	14,166	32.9%	43,078
SANTA BARBARA	37,046	69.0%	16,646	31.0%	53,692
SANTA CLARA	103,412	72.5%	39,198	27.5%	142,610
SANTA CRUZ	18,643	69.1%	8,346	30.9%	26,989
SHASTA	16,370	66.9%	8,092	33.1%	24,462
SIERRA	202	63.9%	114	36.1%	316
SISKIYOU	4,463	70.5%	1,868	29.5%	6,331
SOLANO	29,514	67.3%	14,373	32.7%	43,887
SONOMA	23,991	63.2%	13,961	36.8%	37,952
STANISLAUS	60,848	66.4%	30,733	33.6%	91,581
SUTTER	9,902	66.4%	5,010	33.6%	14,912
TEHAMA	7,109	70.5%	2,976	29.5%	10,085
TRINITY	1,250	68.9%	563	31.1%	1,813
TULARE	82,123	72.0%	31,979	28.0%	114,102
TUOLUMNE	3,184	63.7%	1,817	36.3%	5,001
VENTURA	57,287	67.2%	27,929	32.8%	85,216
YOLO	13,765	59.8%	9,267	40.2%	23,032
YUBA	9,611	64.4%	5,319	35.6%	14,930
CITY OF BERKELEY	7,143	71.3%	2,881	28.7%	10,025
CITY OF LONG BEACH	59,537	69.6%	26,027	30.4%	85,564
CITY OF PASADENA	17,750	69.6%	7,760	30.4%	25,510
TOTAL	3,444,424	67.4%	1,667,777	32.6%	5,112,200

Data Sources:

1. Estimated Population Age 0-18 derived from State of California, Department of Finance, Race/Ethnic Population with Age and Sex Detail , 2000-2050, 2007, (Year 2007.txt), 2007.

2. Percent of Persons Between 100-200% FPL derived from Census of Population and Housing 2000 [California]: Summary File 3, P88. *Ratio of Income in 1999 to Poverty Level*, 2000.

3. Medi-Cal Funded Target Population Under 21 derived from State of California, Department of Health Care Services,

**CALIFORNIA DEPARTMENT OF HEALTH SERVICE
CHILDREN MEDICAL SERVICES
CHILD HEALTH AND DISABILITY PREVENTION (CHDP) PROGRAM
TABLE 2-2
FY 2009-2010 TARGET POPULATION ESTIMATE**

County	Medi-Cal Funded Under 21	Medi-Cal Funded Percent	State Funded Under 19	State Funded Percent	Total Children
ALAMEDA	95,803	71.5%	38,204	28.5%	134,008
ALPINE	91	68.5%	42	31.5%	133
AMADOR	1,594	62.5%	954	37.5%	2,548
BUTTE	22,598	71.1%	9,190	28.9%	31,788
CALAVERAS	2,327	59.8%	1,566	40.2%	3,893
COLUSA	2,491	63.1%	1,457	36.9%	3,948
CONTRA COSTA	56,749	68.2%	26,423	31.8%	83,172
DEL NORTE	3,679	73.6%	1,316	26.4%	4,995
EL DORADO	7,237	58.3%	5,166	41.7%	12,403
FRESNO	151,288	72.5%	57,262	27.5%	208,550
GLENN	3,638	62.7%	2,160	37.3%	5,798
HUMBOLDT	12,114	66.4%	6,123	33.6%	18,237
IMPERIAL	23,773	65.1%	12,754	34.9%	36,527
INYO	1,419	67.5%	683	32.5%	2,102
KERN	116,042	70.3%	48,947	29.7%	164,989
KINGS	17,828	63.3%	10,336	36.7%	28,164
LAKE	6,617	64.8%	3,593	35.2%	10,210
LASSEN	2,521	67.1%	1,238	32.9%	3,759
LOS ANGELES	1,146,646	69.2%	511,010	30.8%	1,657,656
MADERA	20,903	70.1%	8,924	29.9%	29,827
MARIN	7,234	64.4%	3,996	35.6%	11,230
MARIPOSA	1,148	61.0%	735	39.0%	1,883
MENDOCINO	10,063	70.7%	4,178	29.3%	14,241
MERCED	40,568	68.0%	19,059	32.0%	59,627
MODOC	969	69.4%	427	30.6%	1,396
MONO	668	54.5%	558	45.5%	1,226
MONTEREY	40,442	63.9%	22,857	36.1%	63,299
NAPA	6,324	60.0%	4,209	40.0%	10,533
NEVADA	3,834	55.9%	3,020	44.1%	6,854
ORANGE	194,030	62.2%	117,923	37.8%	311,953
PLACER	11,034	58.3%	7,907	41.7%	18,941
PLUMAS	1,126	62.5%	675	37.5%	1,801
RIVERSIDE	167,571	61.8%	103,542	38.2%	271,113
SACRAMENTO	143,459	70.4%	60,395	29.6%	203,854
SAN BENITO	4,443	61.4%	2,796	38.6%	7,239
SAN BERNARDINO	208,729	65.1%	111,956	34.9%	320,685
SAN DIEGO	182,511	60.3%	119,915	39.7%	302,426
SAN FRANCISCO	40,404	71.3%	16,248	28.7%	56,652
SAN JOAQUIN	78,953	68.6%	36,203	31.4%	115,156

Children's Medical Services Plan and Fiscal Guidelines

SAN LUIS OBISPO	13,897	63.2%	8,086	36.8%	21,983
SAN MATEO	28,912	67.1%	14,167	32.9%	43,079
SANTA BARBARA	37,046	69.1%	16,590	30.9%	53,636
SANTA CLARA	103,412	72.5%	39,139	27.5%	142,551
SANTA CRUZ	18,643	69.0%	8,376	31.0%	27,019
SHASTA	16,370	67.1%	8,041	32.9%	24,411
SIERRA	202	62.8%	120	37.2%	322
SISKIYOU	4,463	70.0%	1,910	30.0%	6,373
SOLANO	29,514	67.3%	14,372	32.7%	43,886
SONOMA	23,991	63.2%	13,996	36.8%	37,987
STANISLAUS	60,848	66.7%	30,442	33.3%	91,290
SUTTER	9,902	66.6%	4,955	33.4%	14,857
TEHAMA	7,109	70.5%	2,979	29.5%	10,088
TRINITY	1,250	68.3%	579	31.7%	1,829
TULARE	82,123	72.3%	31,475	27.7%	113,598
TUOLUMNE	3,184	63.4%	1,841	36.6%	5,025
VENTURA	57,287	67.1%	28,151	32.9%	85,438
YOLO	13,765	60.4%	9,037	39.6%	22,802
YUBA	9,611	64.6%	5,261	35.4%	14,872
CITY OF BERKELEY	7,117	71.5%	2,838	28.5%	9,955
CITY OF LONG BEACH	58,097	69.2%	25,891	30.8%	83,989
CITY OF PASADENA	17,469	69.2%	7,785	30.8%	25,254
TOTAL	3,443,080	67.5%	1,659,979	32.5%	5,103,059

Data Sources:

1. Estimated Population Age 0-18 derived from State of California, Department of Finance, Race/Ethnic Population with Age and Sex Detail , 2000-2050, 2009, (Year 2009.txt), 2007.

2. Percent of Persons Between 100-200% FPL derived from Census of Population and Housing 2000 [California]: Summary File 3, P88. Ratio of Income in 1999 to Poverty Level, 2000.

3. Medi-Cal Funded Target Population Under 21 derived from State of California, Department of Health Care Services,

Medical Assistance Program Statistical Report Calendar Year 2006, Table 17, Persons Certified Eligible by County, Sex, Age, July 2006, 2007.

4. Medi-Cal Funded Births 100-200% derived from State of California, Department of Health Care Services, Medi-Cal Funded Deliveries Calendar Year 2005 , Table 2005-13 Deliveries to Medi-Cal Beneficiaries, By Beneficiary County and Ethnicity, Calendar Year 2005.

5. County/City Population derived from California Statistical Abstract, Table B-4 Totap Population California Counties and Cities, 2008, 2009.

**CALIFORNIA DEPARTMENT OF HEALTH SERVICE
CHILDREN MEDICAL SERVICES
CHILD HEALTH AND DISABILITY PREVENTION (CHDP) PROGRAM
TABLE 2-2
FY 2010-2011 TARGET POPULATION ESTIMATE**

Target Population Estimates will not be available for 2010-2011. Please use the FY 2009-2010 Target Population Estimates.

**CALIFORNIA DEPARTMENT OF HEALTH SERVICE
CHILDREN MEDICAL SERVICES
CHILD HEALTH AND DISABILITY PREVENTION (CHDP) PROGRAM
TABLE 2-2
FY 2011-2012 TARGET POPULATION ESTIMATE**

County	Medi-Cal Funded Under 21	Medi-Cal Funded Percent	State Funded Under 19	State Funded Percent	Total Children
ALAMEDA	95,803	71.5%	38,158	28.5%	133,961
ALPINE	91	68.5%	42	31.5%	133
AMADOR	1,594	62.5%	954	37.5%	2,548
BUTTE	22,598	71.1%	9,190	28.9%	31,788
CALAVERAS	2,327	59.8%	1,566	40.2%	3,893
COLUSA	2,491	63.1%	1,457	36.9%	3,948
CONTRA COSTA	56,749	68.2%	26,423	31.8%	83,172
DEL NORTE	3,679	73.6%	1,316	26.4%	4,995
EL DORADO	7,237	58.3%	5,166	41.7%	12,403
FRESNO	151,288	72.5%	57,262	27.5%	208,550
GLENN	3,638	62.7%	2,160	37.3%	5,798
HUMBOLDT	12,114	66.4%	6,123	33.6%	18,237
IMPERIAL	23,773	65.1%	12,754	34.9%	36,527
INYO	1,419	67.5%	683	32.5%	2,102
KERN	116,042	70.3%	48,947	29.7%	164,989
KINGS	17,828	63.3%	10,336	36.7%	28,164
LAKE	6,617	64.8%	3,593	35.2%	10,210
LASSEN	2,521	67.1%	1,238	32.9%	3,759
LOS ANGELES	1,146,646	69.8%	494,999	30.2%	1,641,645
MADERA	20,903	70.1%	8,924	29.9%	29,827
MARIN	7,234	64.4%	3,996	35.6%	11,230
MARIPOSA	1,148	61.0%	735	39.0%	1,883
MENDOCINO	10,063	70.7%	4,178	29.3%	14,241
MERCED	40,568	68.0%	19,059	32.0%	59,627
MODOC	969	69.4%	427	30.6%	1,396
MONO	668	54.5%	558	45.5%	1,226
MONTEREY	40,442	63.9%	22,857	36.1%	63,299
NAPA	6,324	60.0%	4,209	40.0%	10,533
NEVADA	3,834	55.9%	3,020	44.1%	6,854
ORANGE	194,030	62.2%	117,923	37.8%	311,953
PLACER	11,034	58.3%	7,907	41.7%	18,941
PLUMAS	1,126	62.5%	675	37.5%	1,801
RIVERSIDE	167,571	61.8%	103,542	38.2%	271,113
SACRAMENTO	143,459	70.4%	60,395	29.6%	203,854
SAN BENITO	4,443	61.4%	2,796	38.6%	7,239
SAN BERNARDINO	208,729	65.1%	111,956	34.9%	320,685
SAN DIEGO	182,511	60.3%	119,915	39.7%	302,426
SAN FRANCISCO	40,404	71.3%	16,248	28.7%	56,652
SAN JOAQUIN	78,953	68.6%	36,203	31.4%	115,156
SAN LUIS OBISPO	13,897	63.2%	8,086	36.8%	21,983
SAN MATEO	28,912	67.1%	14,167	32.9%	43,079

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SANTA BARBARA	37,046	69.1%	16,590	30.9%	53,636
SANTA CLARA	103,412	72.5%	39,139	27.5%	142,551
SANTA CRUZ	18,643	69.0%	8,376	31.0%	27,019
SHASTA	16,370	67.1%	8,041	32.9%	24,411
SIERRA	202	62.8%	120	37.2%	322
SISKIYOU	4,463	70.0%	1,910	30.0%	6,373
SOLANO	29,514	67.3%	14,372	32.7%	43,886
SONOMA	23,991	63.2%	13,996	36.8%	37,987
STANISLAUS	60,848	66.7%	30,442	33.3%	91,290
SUTTER	9,902	66.6%	4,955	33.4%	14,857
TEHAMA	7,109	70.5%	2,979	29.5%	10,088
TRINITY	1,250	68.3%	579	31.7%	1,829
TULARE	82,123	72.3%	31,475	27.7%	113,598
TUOLUMNE	3,184	63.4%	1,841	36.6%	5,025
VENTURA	57,287	67.1%	28,151	32.9%	85,438
YOLO	13,765	60.4%	9,037	39.6%	22,802
YUBA	9,611	64.6%	5,261	35.4%	14,872
CITY OF BERKELEY	7,117	71.5%	2,838	28.5%	9,955
CIRY OF LONG BEACH	58,097	69.2%	25,891	30.8%	83,989
CITY OF PASADENA	17,469	69.2%	7,785	30.8%	25,254
TOTAL	3,443,080	67.7%	1,643,920	32.3%	5,087,000

Data Sources:

1. Estimated Population Age 0-18 derived from State of California, Department of Finance, Race/Ethnic Population with Age and Sex Detail , 2000-2050, 2009, (Year 2011.txt), 2007.

2. Percent of Persons Between 100-200% FPL derived from Census of Population and Housing 2000 [California]: Summary File 3,

P88. Ratio of Income in 1999 to Poverty Level, 2000.

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4. Medi-Cal Funded Births 100-200% derived from State of California, Department of Health Care Services, Medi-Cal Funded Deliveries Calendar Year 2005 , Table 2005-13 Deliveries to Medi-Cal Beneficiaries, By Beneficiary County and Ethnicity, Calendar Year 2005.

5. County/City Population derived from California Statistical Abstract, Table B-4 Totap Population California Counties and Cities, 2008, 2009.

**HPCFC AVERAGE ANNUAL CASELOAD*
FISCAL YEAR 2011-2012**

County/City Program	May 2011 Caseload	County/City Program	May 2011 Caseload
Alameda	1,138	Placer	211
Alpine	2	Plumas	54
Amador	33	Riverside	3,198
Berkeley	75	Sacramento	2,743
Butte	564	San Benito	44
Calaveras	63	San Bernardino	2,680
Colusa	25	San Diego	2,890
Contra Costa	709	San Francisco	931
Del Norte	68	San Joaquin	918
El Dorado	232	San Luis Obispo	275
Fresno	1,833	San Mateo	206
Glenn	76	Santa Barbara	461
Humboldt	189	Santa Clara	824
Imperial	205	Santa Cruz	187
Inyo	10	Shasta	480
Kern	1,670	Sierra	6
Kings	200	Siskiyou	92
Lake	109	Solano	263
Lassen	44	Sonoma	386
Los Angeles	15,863	Stanislaus	497
Madera	192	Sutter	127
Marin	63	Tehama	146
Mariposa	19	Trinity	44
Mendocino	183	Tulare	703
Merced	598	Tuolumne	69
Modoc	6	Ventura	529
Mono	10	Yolo	211
Monterey	210	Yuba	83
Napa	108		
Nevada	70		
Orange	2,032	TOTAL	45,857

* Caseload Data Source: California Department of Social Services, May 2011