

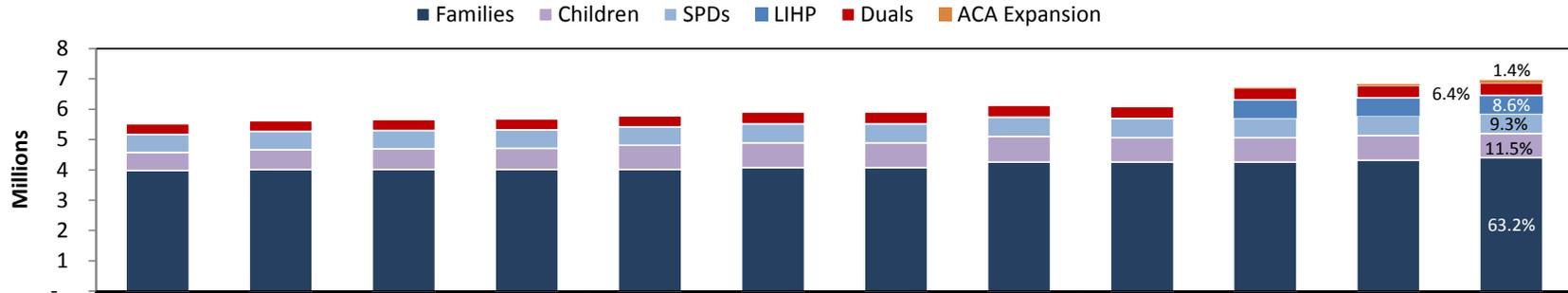


Medi-Cal Managed Care Quarterly Performance Dashboard

Released August 18, 2014

ENROLLMENT

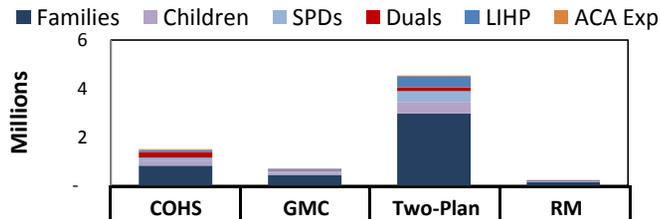
Enrollment By Population: *Statewide*



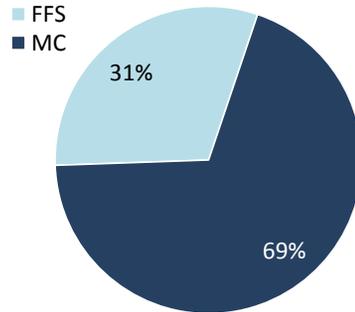
| | Apr-13 | May-13 | Jun-13 | Jul-13 | Aug-13 | Sep-13 | Oct-13 | Nov-13 | Dec-13 | Jan-14 | Feb-14 | Mar-14 |
|---------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|
| All | 5,521,923 | 5,618,633 | 5,655,456 | 5,677,482 | 5,779,199 | 5,903,990 | 5,911,364 | 6,124,936 | 6,088,821 | 6,718,910 | 6,829,544 | 6,961,189 |
| Duals | 347,453 | 350,256 | 353,452 | 356,954 | 359,556 | 384,739 | 387,665 | 390,602 | 393,060 | 399,533 | 403,959 | 408,893 |
| SPDs | 605,261 | 606,842 | 608,334 | 609,399 | 610,482 | 629,727 | 630,844 | 633,298 | 634,020 | 645,238 | 648,195 | 648,685 |
| Children | 596,230 | 660,167 | 681,767 | 697,863 | 792,033 | 810,533 | 813,088 | 850,037 | 808,891 | 801,471 | 815,829 | 800,548 |
| LIHP | - | - | - | - | - | - | - | - | - | 602,125 | 598,703 | 601,904 |
| ACA Expansion | - | - | - | - | - | - | - | - | - | 14,717 | 48,667 | 98,752 |
| Families | 3,972,979 | 4,001,368 | 4,011,903 | 4,013,266 | 4,017,128 | 4,078,991 | 4,079,767 | 4,250,999 | 4,252,850 | 4,255,826 | 4,314,191 | 4,402,407 |

Notes: To prevent double-counting, Cal MediConnect enrollment is not included as part of All enrollment; SPDs are Medi-Cal only; SPD children are categorized as SPD's Children includes Optional Targeted Low Income (up to 266% FPL) whose parents' income is too high for Medi-Cal; Families population includes parents and children who mostly qualify for TANF

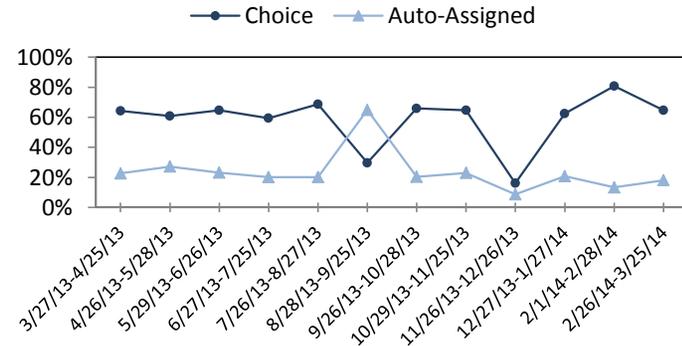
Enrollment as of March 2014: *Plan Model*



Medi-Cal Managed Care vs. FFS as of March 1, 2014: *Statewide*



Choice and Auto-Assignment Rates: *Statewide*



Notes: Does not include transitioning populations, members defaulted because they were previously a member, or if other family members were already assigned to the plan.

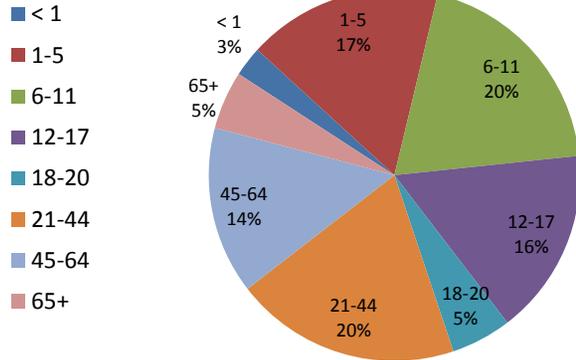


Medi-Cal Managed Care Quarterly Performance Dashboard

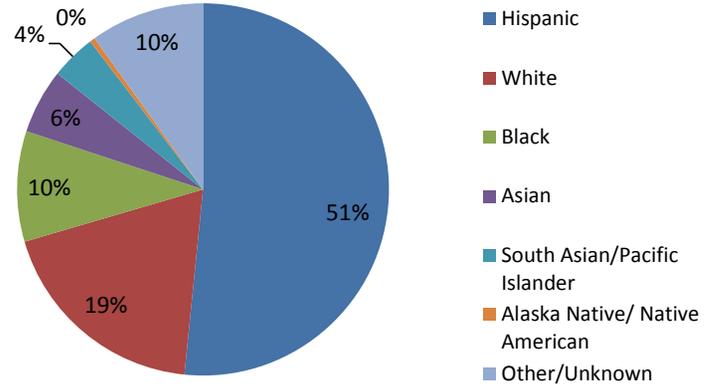
Released August 18, 2014

ENROLLMENT (Cont.)

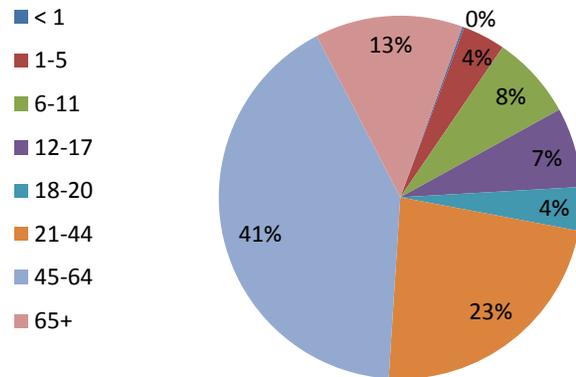
Medi-Cal Managed Care Members by Age as of March 1, 2014 (Includes SPD and Duals)



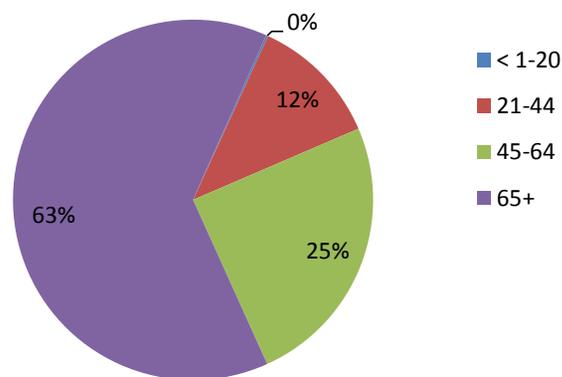
Medi-Cal Managed Care Members by Race/Ethnicity as of March 1, 2014 (Includes SPD and Duals)



Medi-Cal Managed Care Members
Medi-Cal Only SPDs by Age As of March 1, 2014



Medical Managed Care Members
Dual Eligibles by Age As of March 1, 2014



Medi-Cal Managed Care Members by Age/Female Percent of Total (Includes SPDs and Duals)

| Age Group | < 1 | 1-5 | 6-11 | 12-17 | 18-20 | 21-44 | 45-64 | 65+ |
|-----------|---------|-----------|-----------|-----------|---------|-----------|-----------|---------|
| Female | 48.8% | 48.9% | 48.8% | 48.9% | 52.5% | 63.2% | 55.5% | 62.7% |
| Total | 182,691 | 1,183,112 | 1,366,404 | 1,133,810 | 367,221 | 1,372,124 | 1,016,964 | 353,236 |



Medi-Cal Managed Care Quarterly Performance Dashboard

Released August 18, 2014

FINANCIAL

Medical Loss Ratio (without MCO tax)

| Health Plan | 2014 Q1 | 2013 Q4 | 2013 Q3 | 2013 Q2 |
|------------------|---------|---------|---------|---------|
| KP * | 223% | 160% | 159% | 170% |
| HPSJ | 99% | 98% | 93% | 85% |
| Care First | 96% | 94% | 113% | 105% |
| CenCal | 96% | 94% | 91% | 92% |
| HPSM | 95% | 60% | 77% | 77% |
| KFHS | 95% | 94% | 105% | 77% |
| CHWP | 94% | 101% | - | - |
| CalViva | 94% | 92% | 92% | 94% |
| CHG | 94% | 95% | 96% | 102% |
| CCHP | 94% | 94% | 93% | 89% |
| LA Care | 94% | 96% | 97% | 92% |
| SCFHP | 94% | 92% | 94% | 92% |
| Alameda Alliance | 92% | 86% | 97% | 89% |
| SFHP | 90% | 84% | 87% | 93% |
| ABC | 89% | 100% | 106% | 69% |
| IEHP | 89% | 94% | 100% | 89% |
| GCHP | 88% | 87% | 88% | 83% |
| Molina | 87% | 90% | 95% | 98% |
| Partnership | 86% | 89% | 85% | 87% |
| CCAH | 84% | 57% | 74% | 91% |
| Health Net | 80% | 86% | 86% | 83% |
| CalOptima | 77% | 93% | 96% | 91% |

Medical Loss Ratio (MLR) measures what percentage of revenue plans spend on members' medical costs.

*Kaiser's reported cost is based on an allocation to the Medi-Cal Managed Care line-of-business and includes cost of non-covered services.

MLR is ranked by percent, highest to lowest, for the most recent quarter.

CHWP is a new Medi-Cal Managed Care plan, therefore no data exists prior to Q4 2013

Tangible Net Equity

| Health Plan | 2014 Q1 | 2013 Q4 | 2013 Q3 | 2013 Q2 |
|------------------|---------|---------|---------|---------|
| KP | 1816% | 1727% | 1458% | 1199% |
| CCAH | 1150% | 1163% | 882% | 689% |
| Partnership | 715% | 733% | 763% | 719% |
| SFHP | 689% | 812% | 783% | 705% |
| HPSJ | 551% | 273% | 317% | 330% |
| CalOptima | 541% | 407% | 396% | 379% |
| LA Care | 466% | 492% | 432% | 444% |
| Health Net | 419% | 518% | 527% | 545% |
| SCFHP | 380% | 395% | 391% | 375% |
| ABC | 379% | 414% | 391% | 399% |
| KFHS | 361% | 380% | 409% | 487% |
| Care First | 287% | 319% | 334% | 327% |
| IEHP | 238% | 221% | 226% | 279% |
| HPSM | 232% | 710% | 508% | 434% |
| CenCal | 222% | 230% | 228% | 202% |
| CHG | 217% | 218% | 212% | 215% |
| CalViva | 215% | 223% | 219% | 214% |
| CCHP | 171% | 175% | 189% | 186% |
| GCHP | 154% | 131% | 99% | 48% |
| Molina | 150% | 184% | 157% | 152% |
| CHWP | 135% | 167% | - | - |
| Alameda Alliance | 58% | 69% | 44% | 106% |

Tangible Net Equity (TNE) measures financial strength in cash assets.

TNE is ranked by percent, highest to lowest, for the most recent quarter.

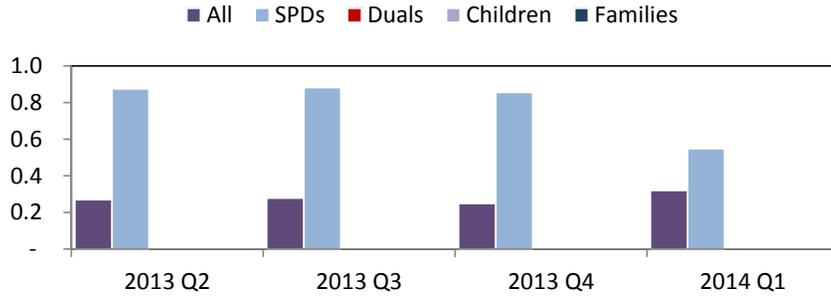


Medi-Cal Managed Care Quarterly Performance Dashboard

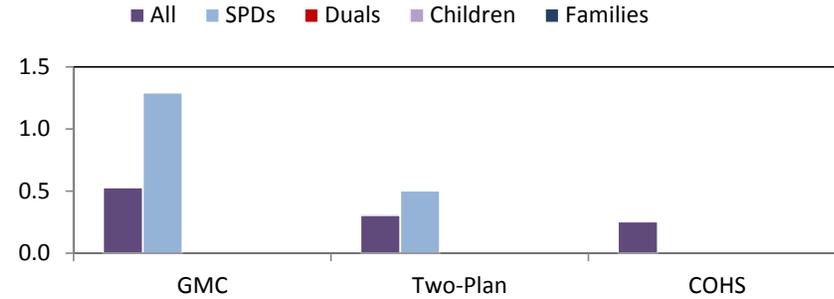
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ACCESS

Grievances per 1,000 Member Months (2014 Q1): Statewide



Grievances per 1,000 Member Months (2014 Q1): Plan Model



We cannot breakout grievance data for duals, children, and families at this time. This data source does not include grievances for SPDs in COHS counties.

Grievances by Reason (2014 Q1): Statewide

| Population | Physical Accessibility | Access to Primary Care | Access to Specialists | Out-of-Network | Other Types of Grievances |
|------------|------------------------|------------------------|-----------------------|----------------|---------------------------|
| SPDs | 8 | 166 | 76 | 48 | 1,728 |

State Fair Hearings by Reason (2014 Q1): Statewide

| Reason Category | Total | SPDs | Children | Other |
|---------------------------|------------|------------|-----------|------------|
| MER/EDER | 168 | 62 | 2 | 104 |
| Pharmacy | 164 | 88 | 2 | 74 |
| Surgery/Treatment | 97 | 48 | 3 | 46 |
| Consultation/Specialist | 49 | 27 | 0 | 22 |
| Durable Medical Equipment | 45 | 40 | 0 | 5 |
| Denial of Service | 42 | 17 | 2 | 23 |
| All Other Reasons | 123 | 60 | 3 | 60 |
| Total | 688 | 342 | 12 | 334 |

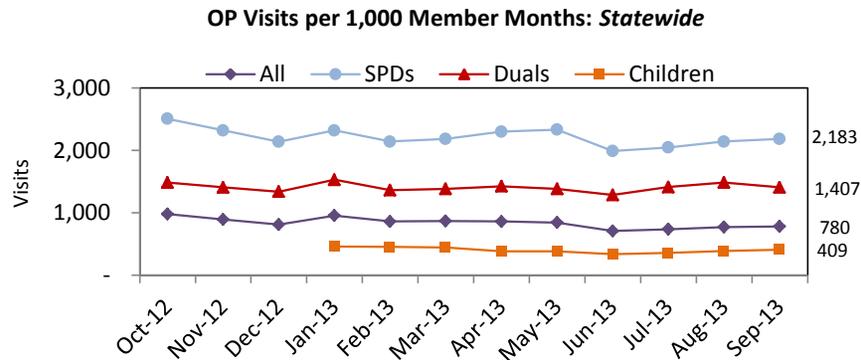
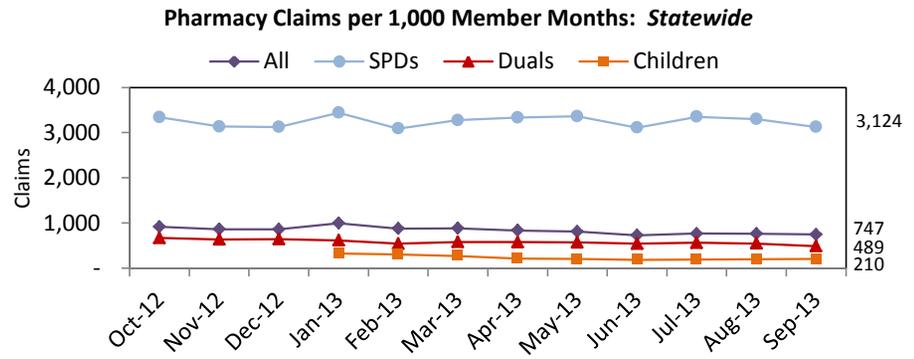
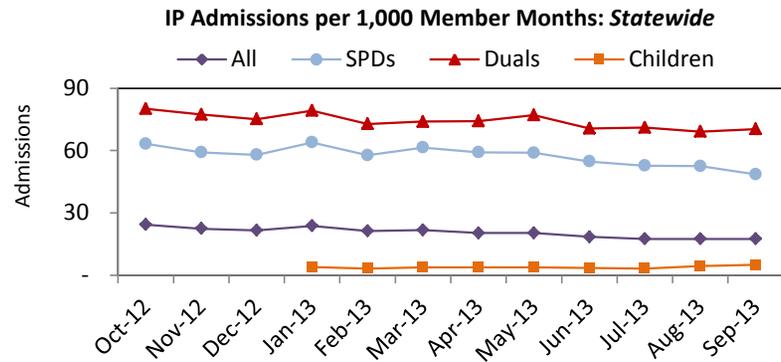
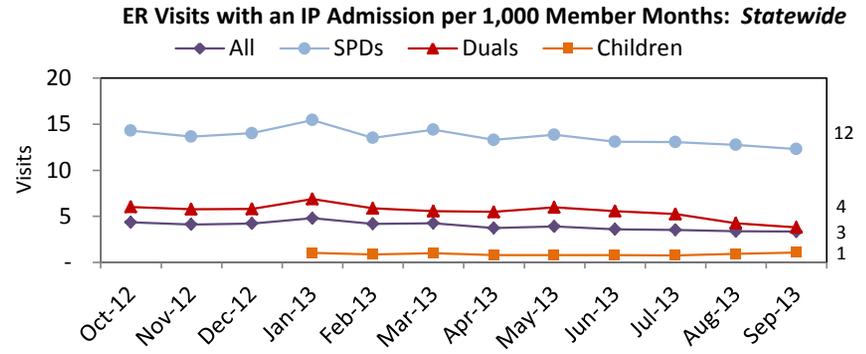
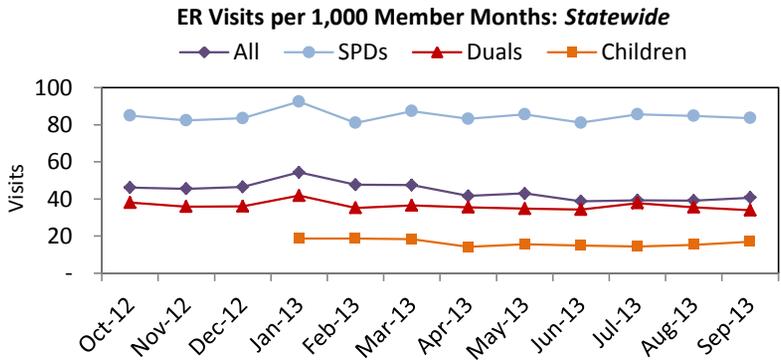
Note: State Fair Hearings data is DHCS data and may not be consistent with DSS data.



Medi-Cal Managed Care Quarterly Performance Dashboard

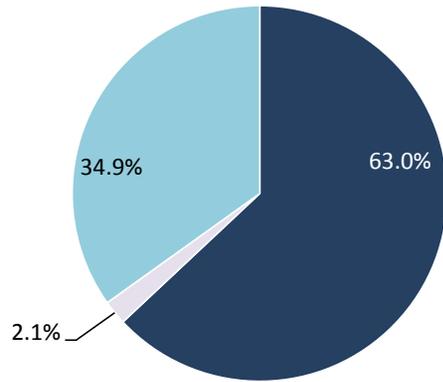
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ACCESS (Cont.)

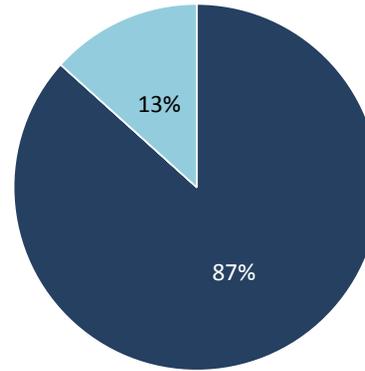


ACCESS (Cont.)

SPDs Continuity of Care (2014 Q1):
Statewide



Children Continuity of Care (2014 Q1):
Statewide



■ Approved

■ Denied

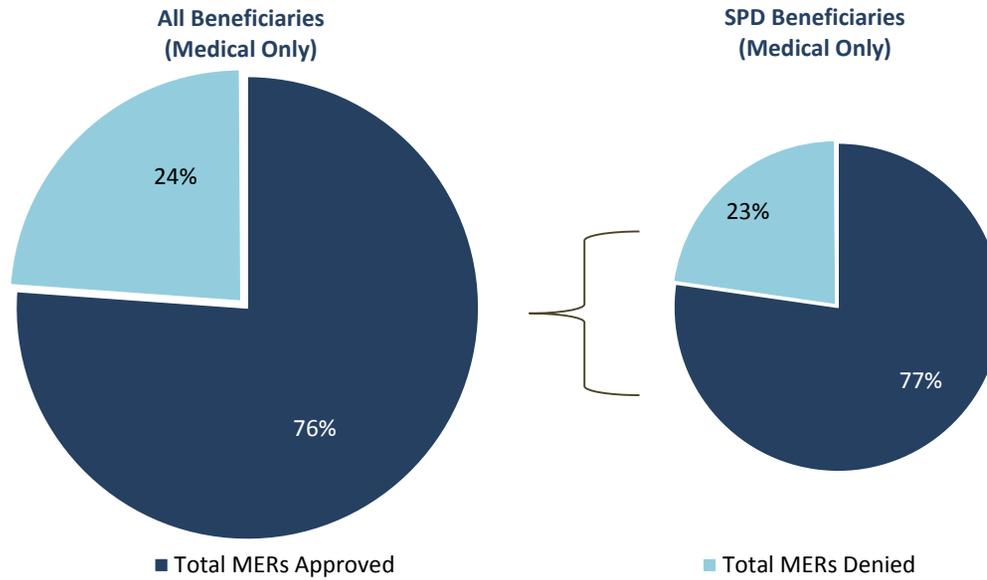
■ In-Process

| | |
|---------------------------|-----|
| Total Number of Requests: | 711 |
|---------------------------|-----|

| | |
|---------------------------|----|
| Total Number of Requests: | 15 |
|---------------------------|----|

ACCESS (Cont.)

MERs (2014 Q1): *Statewide*



| | Q1 2014 | SPDs | All - YTD | SPDs - YTD |
|-------------------------------------|---------|-------|-----------|------------|
| Total in FFS due to an approved MER | 9,458 | 2,243 | 9,458 | 2,243 |
| Total MERs Denied | 2,953 | 657 | 2,953 | 657 |
| Total MERs Pending | 12 | 3 | 12 | 3 |



Medi-Cal Managed Care Quarterly Performance Dashboard

Released August 18, 2014

QUALITY AND SATISFACTION

2010 CAHPS Satisfaction with Health Plan (9 or 10 Rating): *Statewide*

| Adult | | Child | |
|------------------|--------------|------------------|--------------|
| Plan | Rate | Plan | Rate |
| KP North | 65.4% | KP South | 73.4% |
| KP South | 64.9% | KP North | 72.3% |
| HPSM | 54.4% | CCAH | 70.7% |
| CCAH | 51.2% | HPSM | 70.0% |
| Partnership | 50.9% | SCFHP | 68.0% |
| CenCal | 48.7% | CalOptima | 66.1% |
| HPSJ | 48.1% | CenCal | 64.9% |
| CalOptima | 48.1% | LA Care | 63.1% |
| IEHP | 46.7% | HPSJ | 62.8% |
| KFHS | 46.1% | IEHP | 61.9% |
| LA Care | 45.9% | CCHP | 61.3% |
| CHG | 45.6% | Health Net | 61.2% |
| Health Net | 44.7% | Partnership | 61.1% |
| CCHP | 44.6% | KFHS | 61.1% |
| Alameda Alliance | 44.4% | CHG | 61.0% |
| SCFHP | 43.0% | Care First | 60.9% |
| Molina | 42.6% | ABC | 59.8% |
| ABC | 40.5% | Molina | 59.4% |
| Care First | 39.0% | Alameda Alliance | 58.4% |
| SFHP | 38.0% | SFHP | 58.0% |
| Average | 47.6% | Average | 63.8% |

Note: The CAHPS Statewide Average represents a straight average of all health plans (not the weighted average).

Medi-Cal Managed Care members were surveyed to rate their MCP on a scale of 0 to 10, with 0 being the "worst health plan possible" and 10 being the "best health plan possible."

2013 CAHPS Satisfaction with Health Plan (9 or 10 Rating): *Statewide*

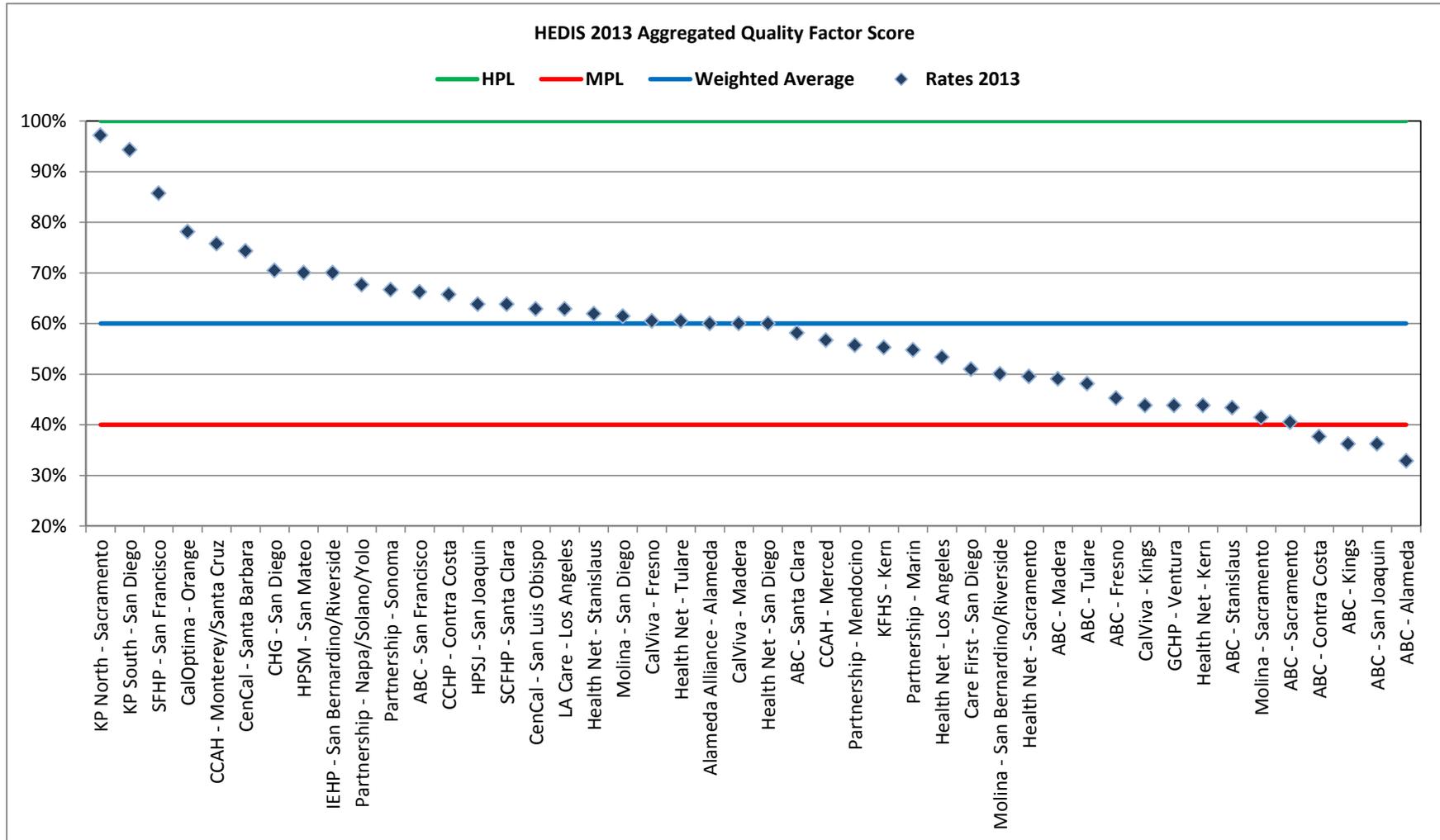
| Adult | | Child | |
|------------------|--------------|------------------|--------------|
| Plan | Rate | Plan | Rate |
| KP South | 70.0% | KP South | 78.9% |
| KP North | 68.8% | KP North | 76.2% |
| IEHP | 57.3% | HPSM | 70.3% |
| CalOptima | 56.5% | SCFHP | 68.7% |
| HPSM | 56.5% | CalOptima | 68.5% |
| CCAH | 54.7% | HPSJ | 68.4% |
| HPSJ | 54.2% | LA Care | 68.2% |
| GCHP | 51.2% | IEHP | 67.8% |
| Partnership | 51.1% | CHG | 67.3% |
| SCFHP | 50.7% | Health Net | 66.5% |
| KFHS | 50.2% | KFHS | 65.9% |
| CCHP | 49.9% | CalViva | 65.9% |
| Care First | 49.6% | Alameda Alliance | 65.8% |
| CalViva | 48.8% | Care First | 64.4% |
| Health Net | 47.7% | CenCal | 64.3% |
| SFHP | 47.5% | ABC | 64.3% |
| CHG | 47.5% | CCAH | 64.2% |
| CenCal | 47.0% | Partnership | 61.0% |
| LA Care | 46.6% | SFHP | 60.9% |
| ABC | 46.3% | CCHP | 60.8% |
| Alameda Alliance | 45.2% | Molina | 59.4% |
| Molina | 44.7% | GCHP | 58.9% |
| Average | 51.9% | Average | 66.2% |



Medi-Cal Managed Care Quarterly Performance Dashboard

Released August 18, 2014

QUALITY AND SATISFACTION (Cont.)



Note: The Aggregated Quality Factor Score (AQFS) is a single score that accounts for plan performance on all DHCS-selected Health Effectiveness Data and Information Set (HEDIS) indicators. It is a composite rate calculated as percent of the National High Performance Level (HPL).

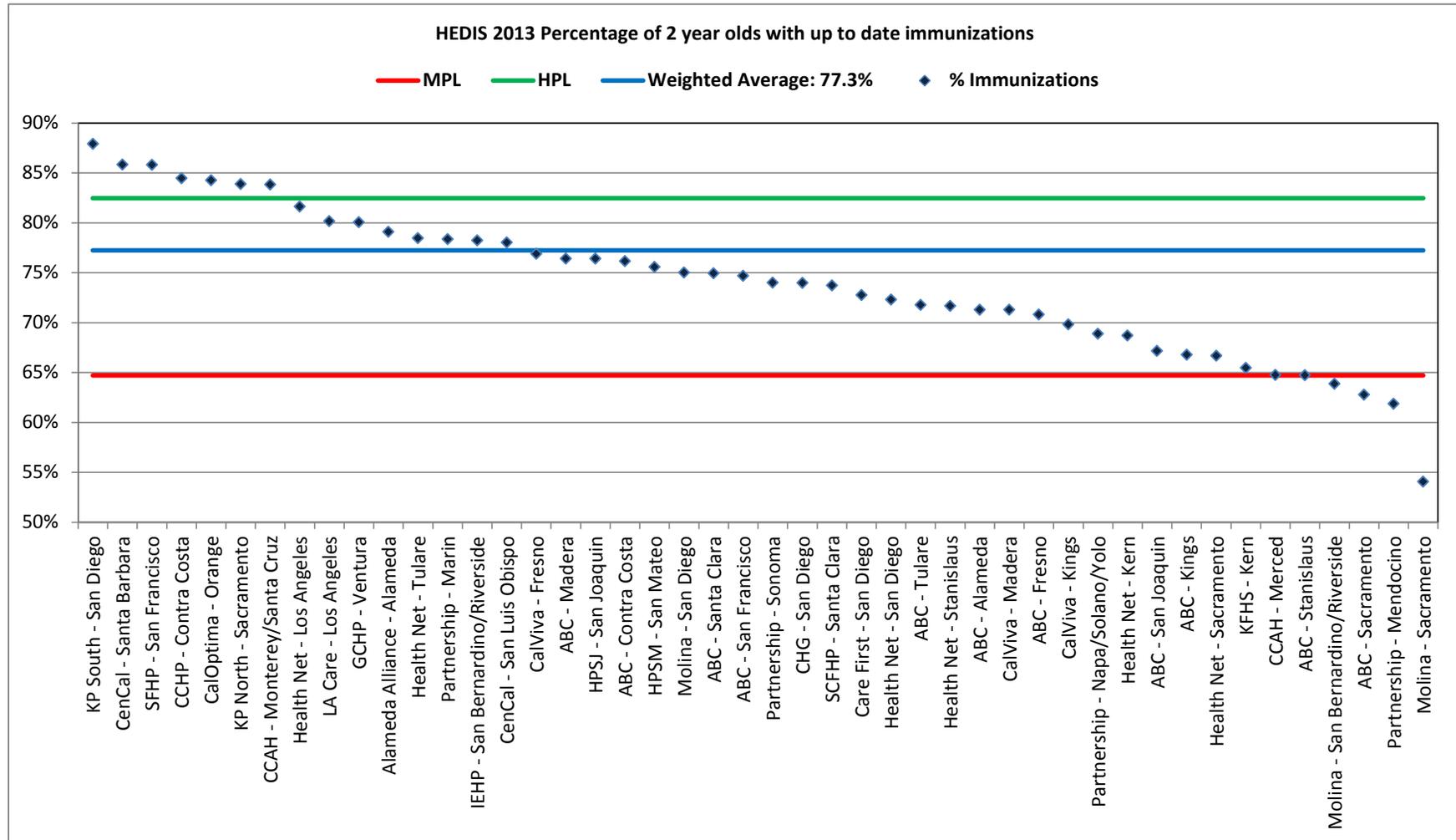
The High Performance Level is 100%. The Minimum Performance Level is 40%. The Weighted Average is 60%.



Medi-Cal Managed Care Quarterly Performance Dashboard

Released August 18, 2014

QUALITY AND SATISFACTION (Cont.)



Source: Healthcare Effectiveness Data and Information Set (HEDIS) 2013. Rates reflect 2012 measurement year data.

[Link to HEDIS 2013.](#)

High Performance Level (HPL): Top 10% of Medicaid plans in the U.S. documented immunizing more than 82.5% of 2 year olds.

The Minimum Performance Level (MPL): Bottom 25% of Medicaid plan in the U.S. documented immunizing less than 64.7% of 2 year olds.

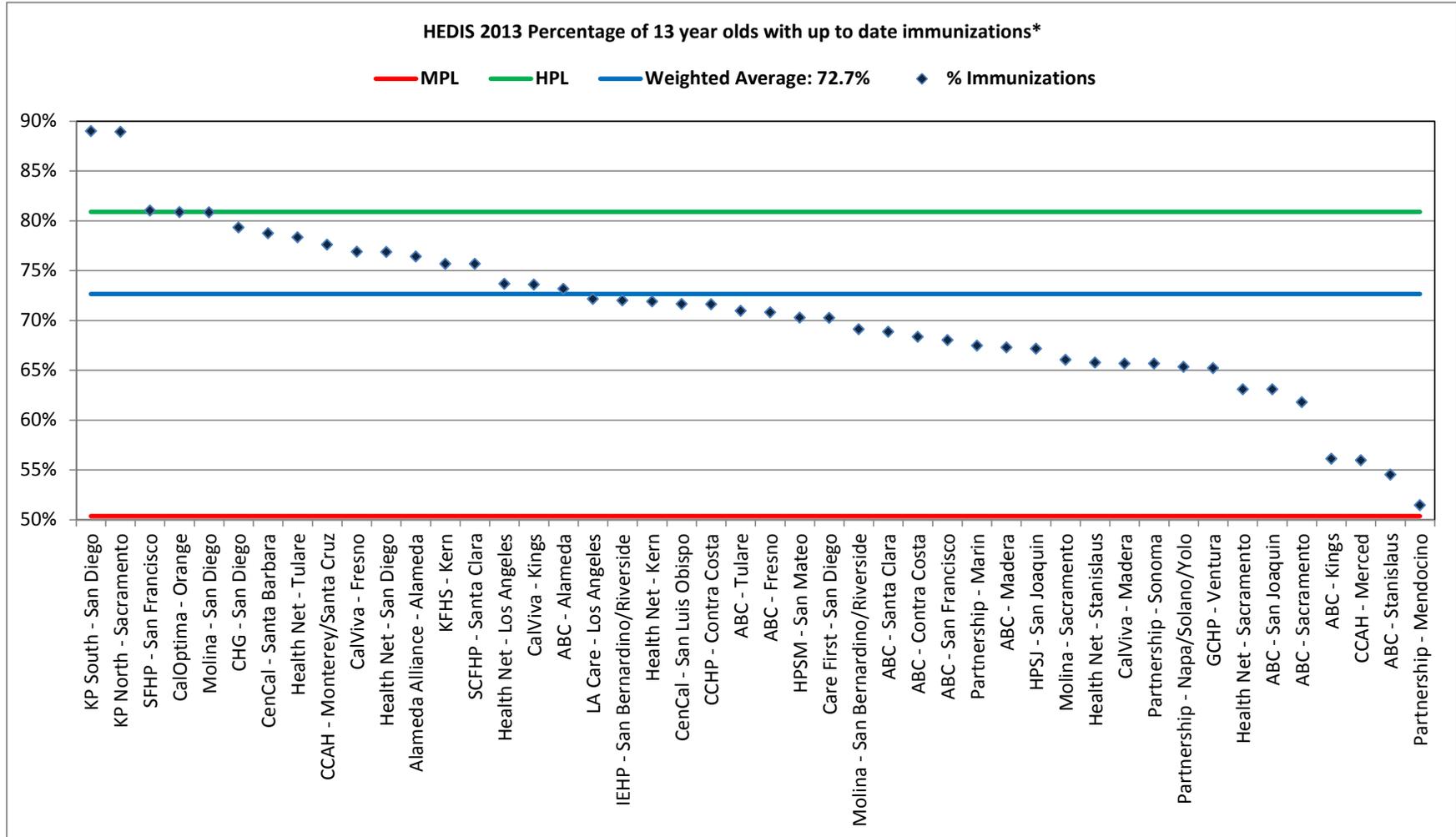
CIS-3 Combo includes immunizations for diphtheria, tetanus, pertussis, polio, measles, mumps, rubella, haemophilus influenzae type B (Hib), hepatitis B, chicken pox, and pneumococcal disease



Medi-Cal Managed Care Quarterly Performance Dashboard

Released August 18, 2014

QUALITY AND SATISFACTION (Cont.)



Source: Healthcare Effectiveness Data and Information Set (HEDIS) 2013. Rates reflect 2012 measurement year data.

[Link to HEDIS 2013.](#)

High Performance Level (HPL): Top 10% of Medicaid plans in the U.S. documented immunizing more than 80.9% of adolescents.

The Minimum Performance Level (MPL): Bottom 25% of Medicaid plan in the U.S. documented immunizing less than 50.4% of adolescents.

*Received at least one dose of meningococcal and one tetanus, diphtheria toxoids and acellular pertussis (Tdap) or one tetanus, diphtheria toxoids. (Immunization of Adolescents, IMA-Combo)