



CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES

MANAGED CARE PERFORMANCE MONITORING DASHBOARD REPORT

Released December 19, 2018

Quarterly Release Notes

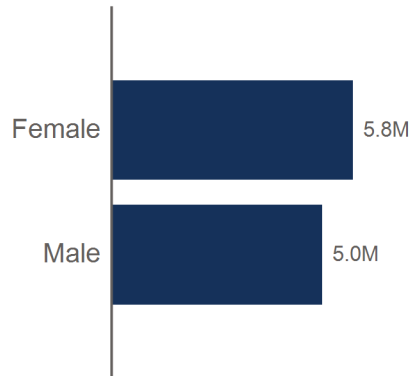
- The Network Adequacy graphs were redesigned and now display provider ratios by plan parent.
- Central California Alliance for Health (CCAH) had a data quality issue with their Primary Care Physicians (PCPs) count for June 2018. DHCS has notified the plan of this data quality issue. In May 2018, CCAH reported 3 PCPs per 2,000 Members.
- Dashboard data is updated quarterly except for Network Adequacy and HEDIS metrics. Latest refresh date: 11/01/2018.
- Network Adequacy data is refreshed monthly. Latest refresh date: 12/01/2018.
- HEDIS data is refreshed annually. Latest refresh date: 09/01/2018.

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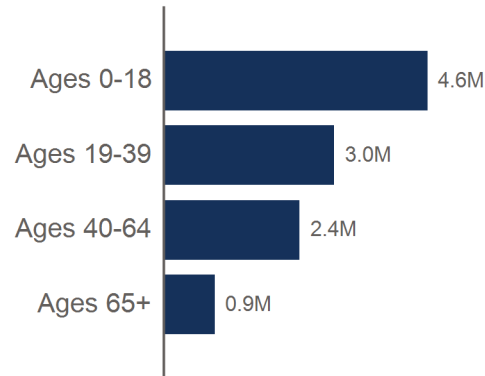


Managed Care Member Demographics (Jun-18)

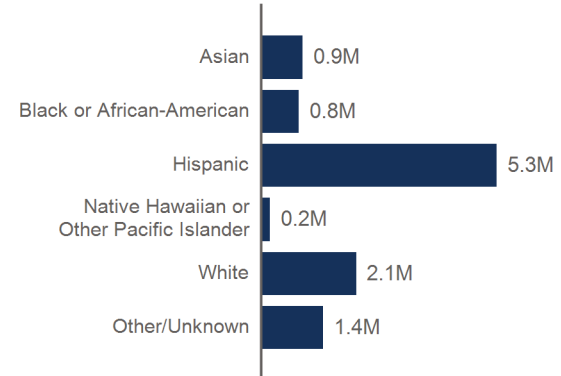
By Sex



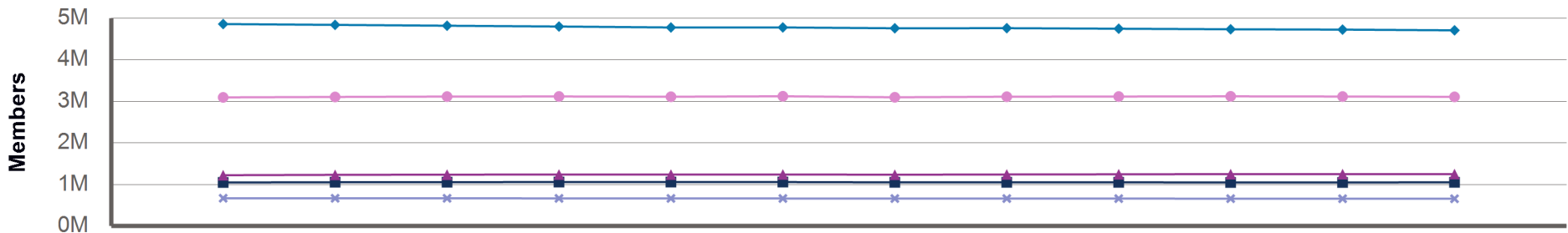
By Age



By Ethnicity



By Population



	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
Dual	1,048,649	1,054,220	1,057,161	1,058,753	1,057,663	1,058,540	1,051,946	1,051,425	1,053,181	1,048,733	1,050,262	1,052,376
MO-ACA	3,095,047	3,105,504	3,114,257	3,117,108	3,110,682	3,121,502	3,097,668	3,111,138	3,115,159	3,119,764	3,115,038	3,107,735
MO-OTLIC	1,223,687	1,232,443	1,237,667	1,239,804	1,239,338	1,241,278	1,236,308	1,241,641	1,245,485	1,250,451	1,250,678	1,250,885
MO-SPD	669,983	669,296	668,585	666,622	665,261	664,110	662,584	662,761	661,236	660,197	658,567	657,614
MO-Other	4,857,967	4,838,253	4,818,285	4,798,903	4,775,683	4,776,750	4,756,389	4,759,382	4,745,755	4,732,463	4,724,189	4,707,161
MC Total	10,895,333	10,899,716	10,895,955	10,881,190	10,848,627	10,862,180	10,804,895	10,826,347	10,820,816	10,811,608	10,798,734	10,775,771

Source: Enterprise Performance Monitoring System

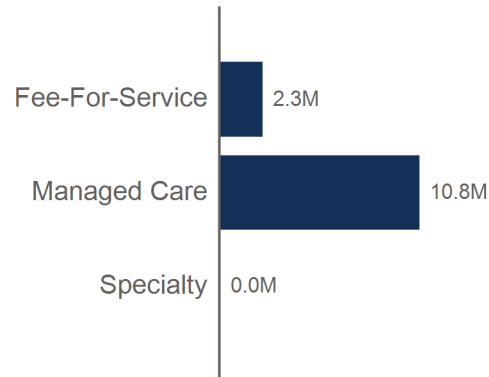
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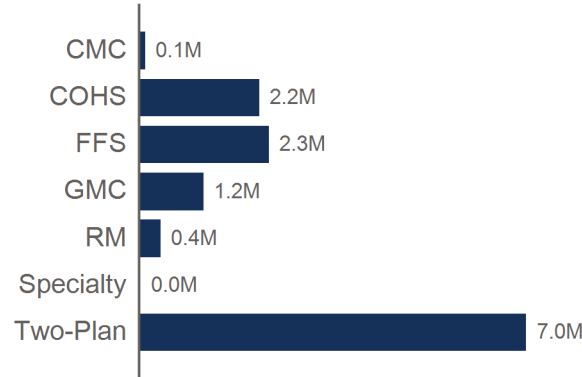


Medi-Cal Member Demographics (Jun-18)

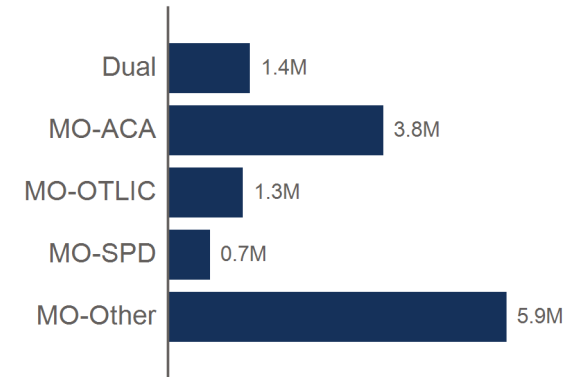
By Medi-Cal Type



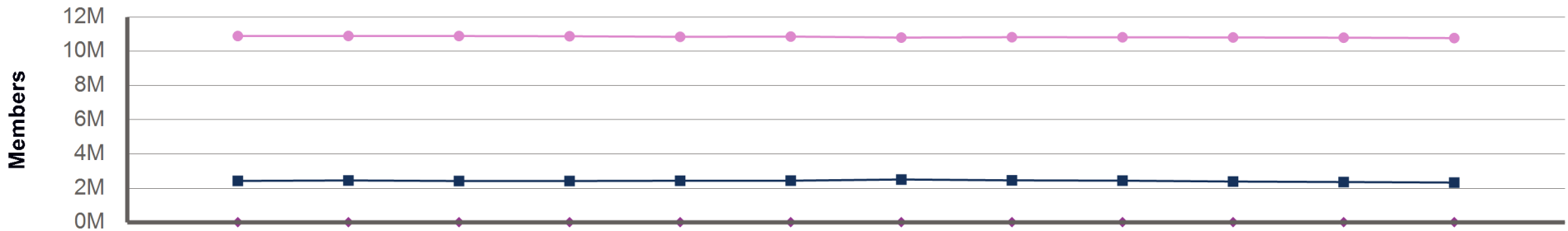
By Plan Model



By Population



By Medi-Cal Type



	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
Fee-For-Service	2,432,030	2,459,785	2,426,376	2,425,335	2,440,950	2,446,364	2,513,784	2,465,587	2,446,086	2,394,802	2,366,554	2,335,255
Managed Care	10,895,333	10,899,716	10,895,955	10,881,190	10,848,627	10,862,180	10,804,895	10,826,347	10,820,816	10,811,608	10,798,734	10,775,771
Specialty	22,239	22,387	22,475	22,577	22,604	22,945	22,987	22,933	23,007	22,983	23,001	23,134
Total	13,349,602	13,381,888	13,344,806	13,329,102	13,312,181	13,331,489	13,341,666	13,314,867	13,289,909	13,229,393	13,188,289	13,134,160

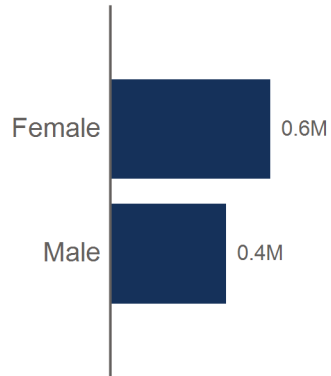
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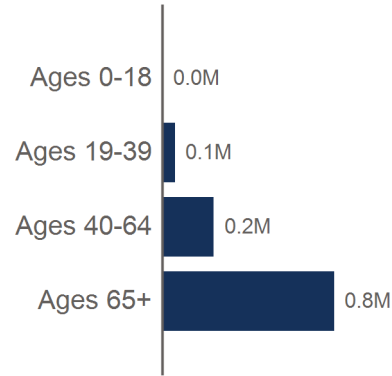


Dual Member Demographics (Jun-18)

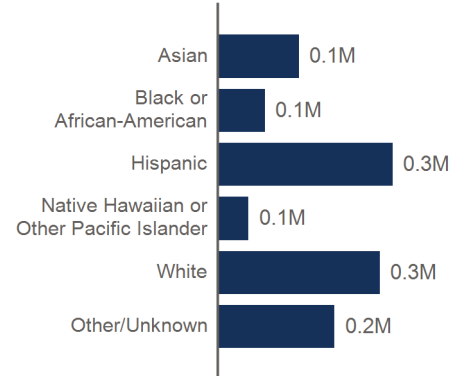
By Sex



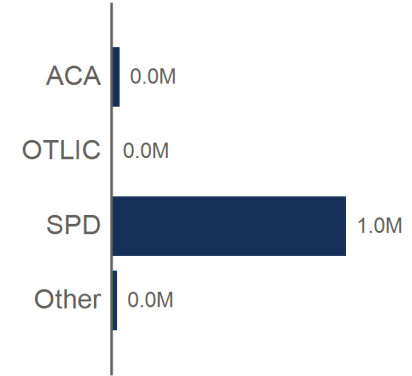
By Age



By Ethnicity

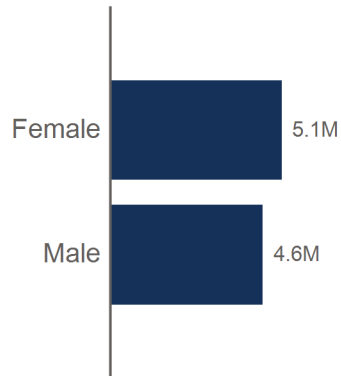


By Population

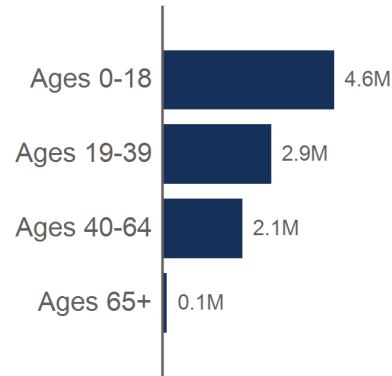


Non-Dual Member Demographics (Jun-18)

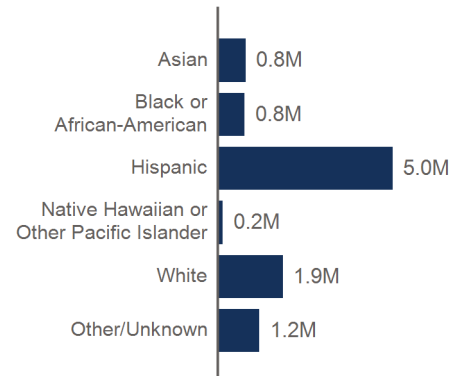
By Sex



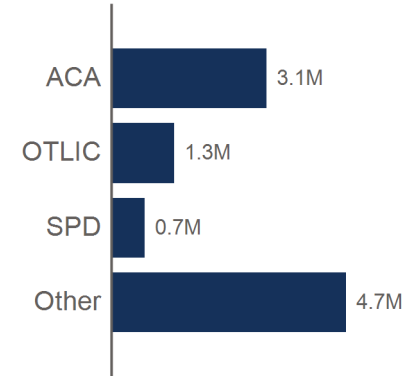
By Age



By Ethnicity



By Population



Source: Enterprise Performance Monitoring System
Note: Data in this dashboard is preliminary and subject to change

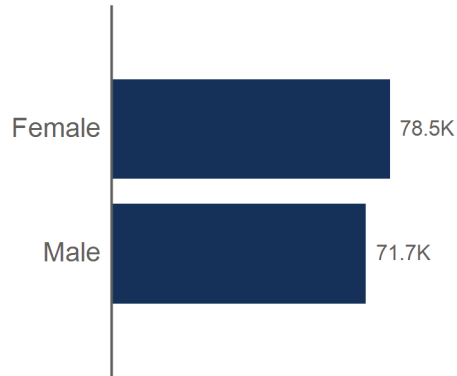
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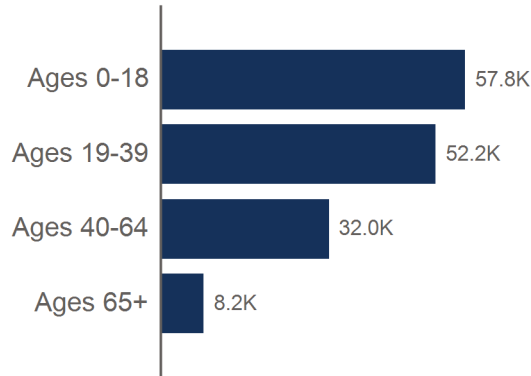


Count of New Enrollments (Jun-18)

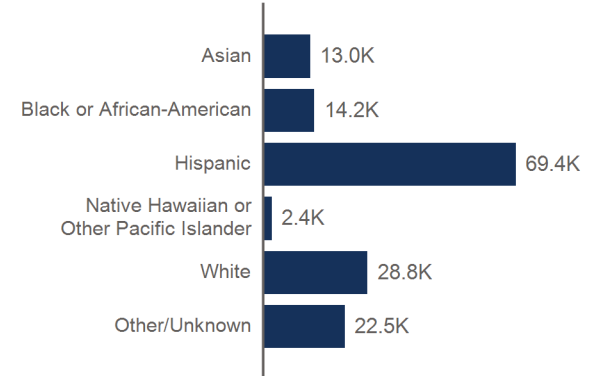
By Sex



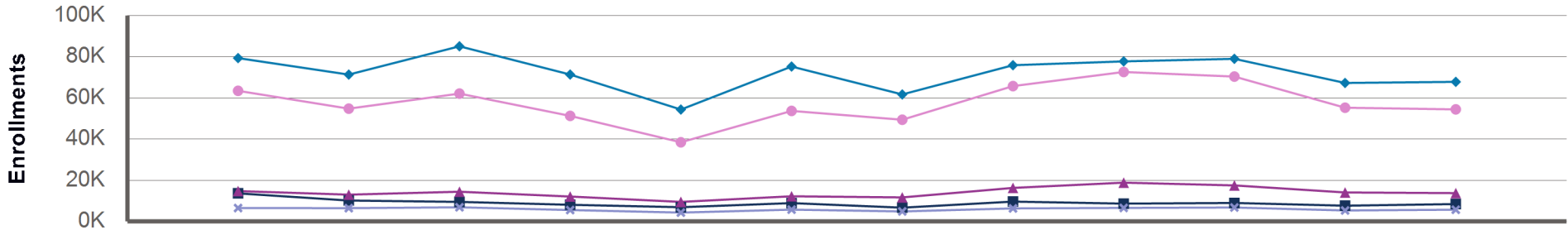
By Age



By Ethnicity



By Population



	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
Dual	13,673	10,186	9,518	8,126	6,946	8,940	6,711	9,674	8,685	9,011	7,686	8,480
MO-ACA	63,439	54,785	62,089	51,270	38,460	53,684	49,402	65,732	72,585	70,361	55,238	54,436
MO-OTLIC	14,762	13,045	14,461	12,116	9,521	12,254	11,695	16,310	18,865	17,529	14,108	13,775
MO-SPD	6,544	6,486	6,914	5,571	4,324	5,769	4,895	6,360	6,596	6,801	5,360	5,727
MO-Other	79,325	71,319	85,045	71,336	54,357	75,223	61,683	75,874	77,722	78,972	67,258	67,796
Total	177,743	155,821	178,027	148,419	113,608	155,870	134,386	173,950	184,453	182,674	149,650	150,214

Source: Enterprise Performance Monitoring System
 Note: Data in this dashboard is preliminary and subject to change

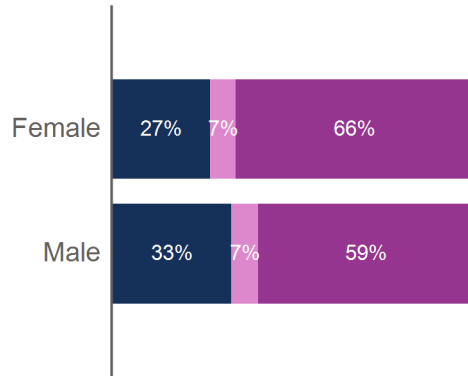
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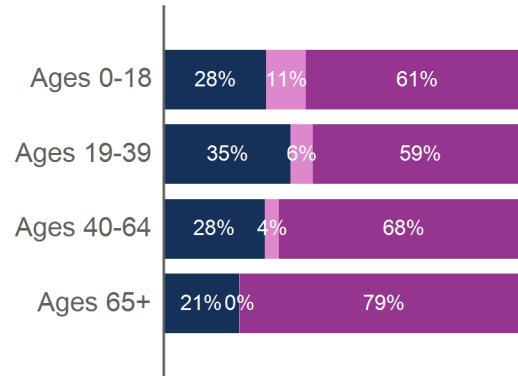
Count of New Enrollments: Enrollment Type (Jun-18)



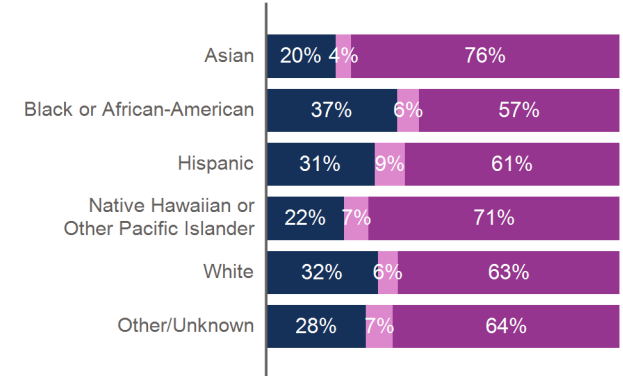
By Sex



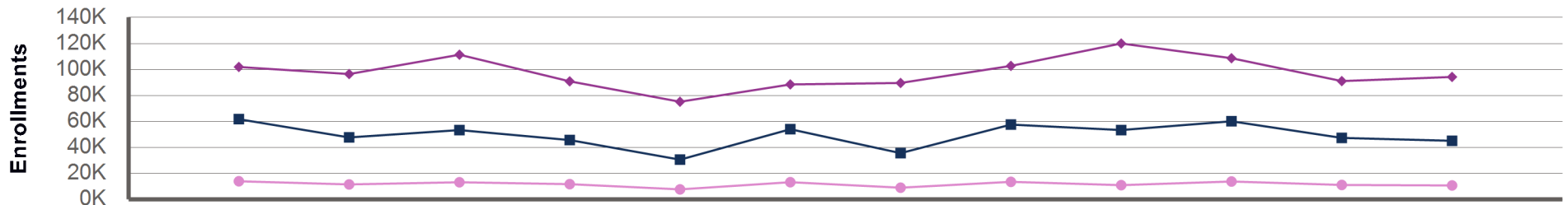
By Age



By Ethnicity



By Enrollment Type



	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
Auto Assigned	61,777	47,734	53,395	45,718	30,642	54,059	35,663	57,608	53,414	60,162	47,380	45,139
Passive/Prior	14,025	11,596	13,267	11,813	7,777	13,310	9,088	13,577	11,033	13,834	11,188	10,813
Regular	101,941	96,491	111,365	90,888	75,189	88,501	89,635	102,765	120,006	108,678	91,082	94,262
Total	177,743	155,821	178,027	148,419	113,608	155,870	134,386	173,950	184,453	182,674	149,650	150,214

Source: Enterprise Performance Monitoring System
Note: Data in this dashboard is preliminary and subject to change

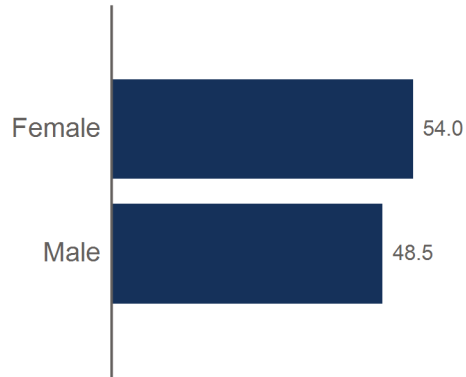
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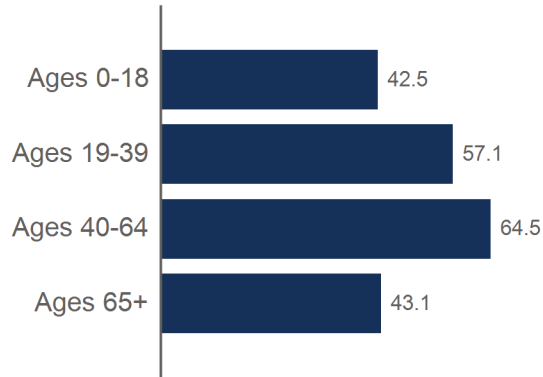


Emergency Room Visits per 1,000 Members (Dec-17)

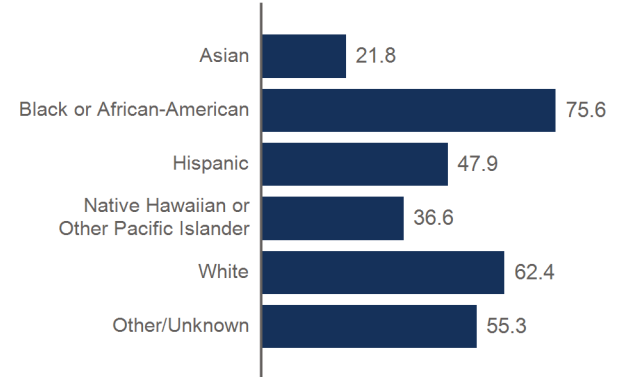
By Sex



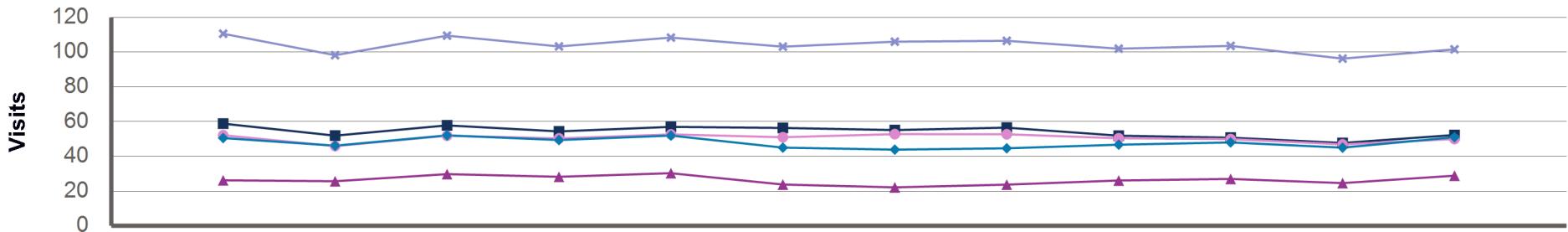
By Age



By Ethnicity



By Population



	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17
Dual	58.9	51.9	57.8	54.4	57.0	56.4	55.2	56.5	51.9	50.8	47.7	52.3
MO-ACA	52.2	45.9	51.9	50.3	52.7	51.0	52.8	52.7	50.4	50.0	46.9	50.0
MO-OTLIC	26.3	25.7	29.8	28.3	30.3	23.8	22.2	23.8	26.1	27.0	24.6	28.9
MO-SPD	110.6	98.2	109.5	103.3	108.4	103.1	106.0	106.5	102.0	103.6	96.3	101.6
MO-Other	50.6	46.2	52.1	49.4	52.0	45.0	43.9	44.7	46.7	48.0	45.0	51.1
Total	52.9	47.6	53.7	51.1	53.7	49.0	48.9	49.5	49.3	49.9	46.6	51.4

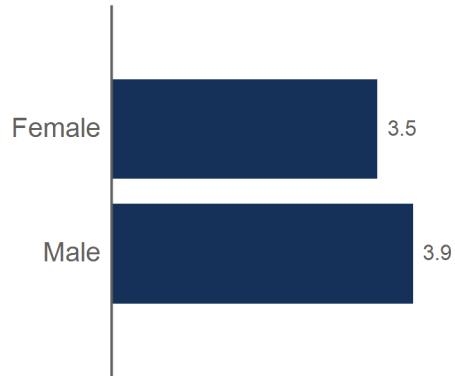
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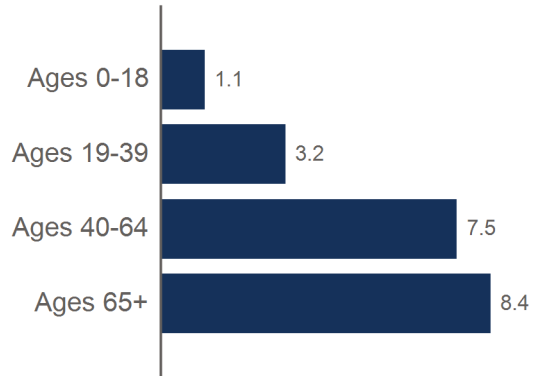


Emergency Room Visits with an Inpatient Admission per 1,000 Members (Dec-17)

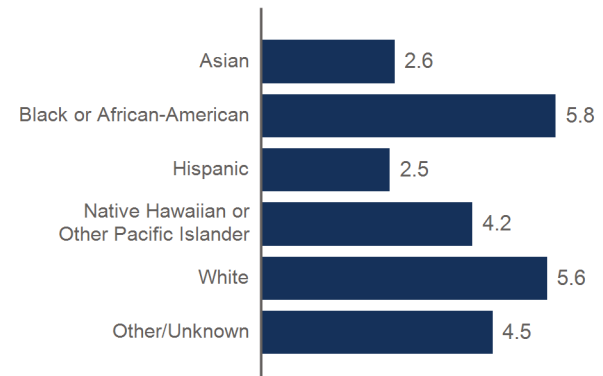
By Sex



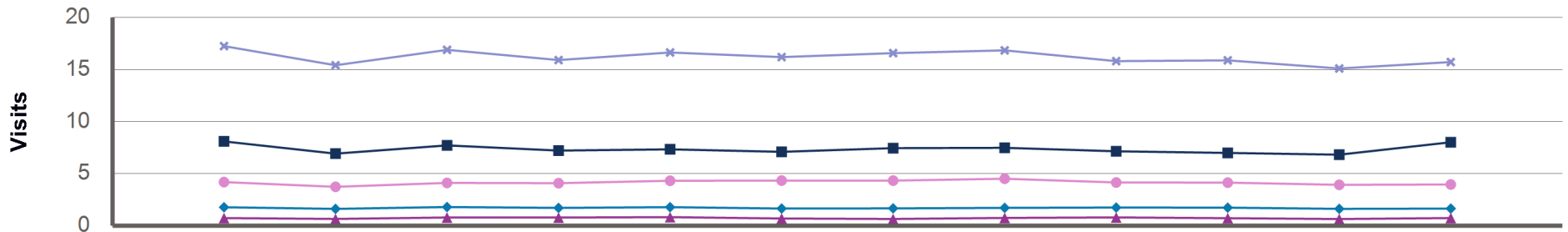
By Age



By Ethnicity



By Population



	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17
Dual	8.1	6.9	7.7	7.2	7.3	7.1	7.5	7.5	7.2	7.0	6.8	8.0
MO-ACA	4.2	3.7	4.1	4.1	4.3	4.3	4.3	4.5	4.2	4.1	3.9	4.0
MO-OTLIC	0.7	0.7	0.8	0.8	0.8	0.7	0.7	0.8	0.8	0.7	0.7	0.7
MO-SPD	17.2	15.4	16.9	15.9	16.6	16.2	16.6	16.8	15.8	15.9	15.1	15.7
MO-Other	1.8	1.6	1.8	1.7	1.8	1.7	1.7	1.7	1.8	1.7	1.6	1.7
Total	3.9	3.5	3.8	3.7	3.8	3.7	3.8	3.9	3.7	3.7	3.5	3.7

Source: Enterprise Performance Monitoring System
Note: Data in this dashboard is preliminary and subject to change

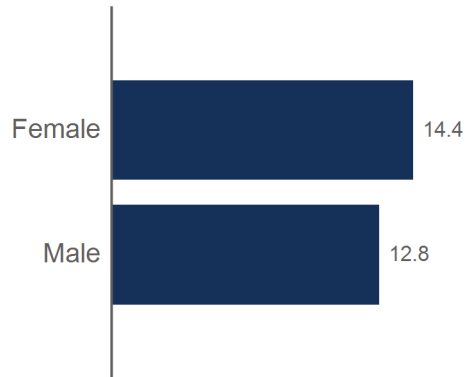
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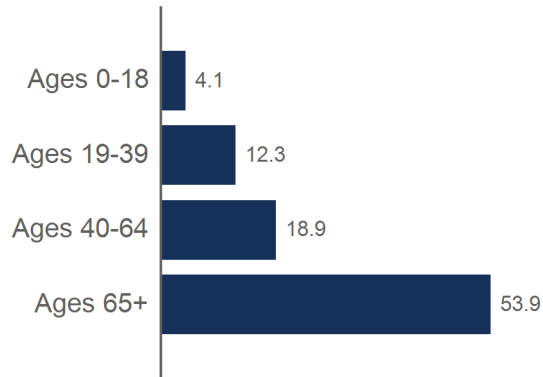


Inpatient Admissions per 1,000 Members (Dec-17)

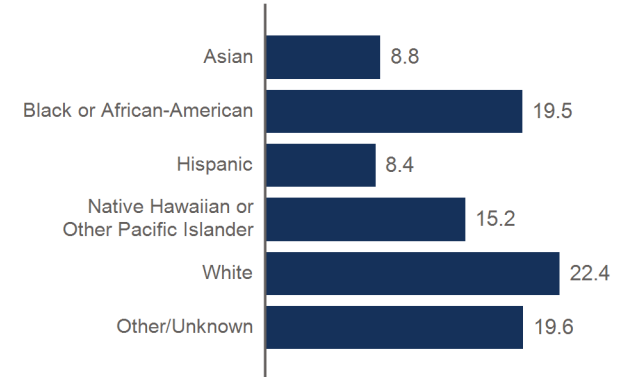
By Sex



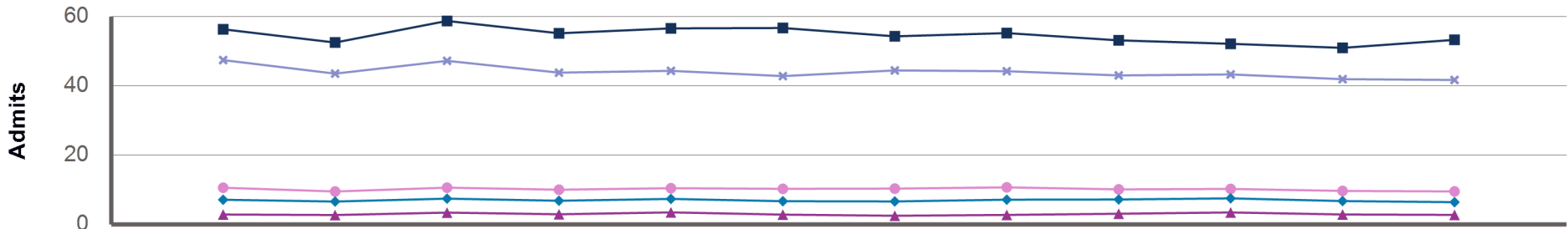
By Age



By Ethnicity



By Population



	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17
Dual	56.3	52.5	58.7	55.2	56.6	56.7	54.3	55.2	53.1	52.1	51.0	53.3
MO-ACA	10.6	9.5	10.7	10.1	10.5	10.3	10.4	10.7	10.2	10.3	9.7	9.6
MO-OTLIC	2.9	2.8	3.5	3.0	3.5	2.9	2.5	2.8	3.1	3.5	2.9	2.8
MO-SPD	47.4	43.5	47.2	43.8	44.3	42.8	44.4	44.2	43.0	43.3	41.9	41.7
MO-Other	7.2	6.7	7.5	6.9	7.4	6.7	6.7	7.2	7.2	7.6	6.8	6.5
Total	14.8	13.7	15.3	14.2	14.8	14.3	14.2	14.6	14.3	14.4	13.6	13.7

Source: Enterprise Performance Monitoring System
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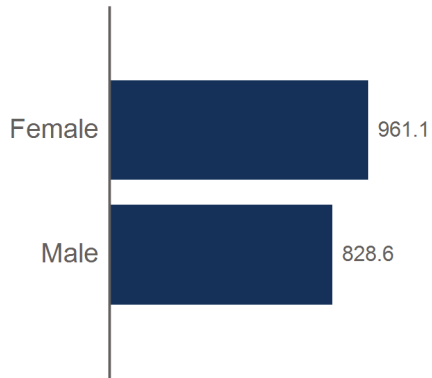
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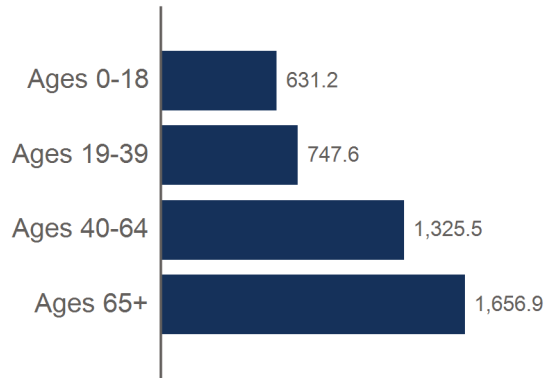


Outpatient Visits per 1,000 Members (Dec-17)

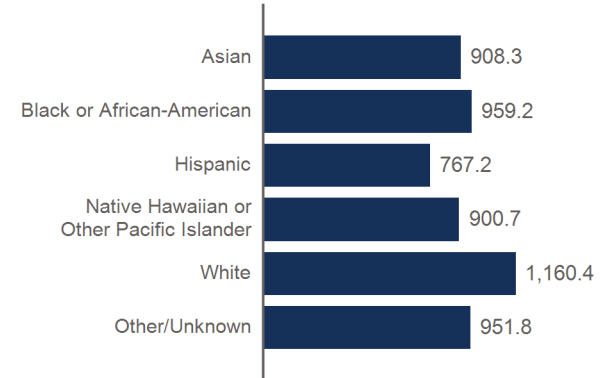
By Sex



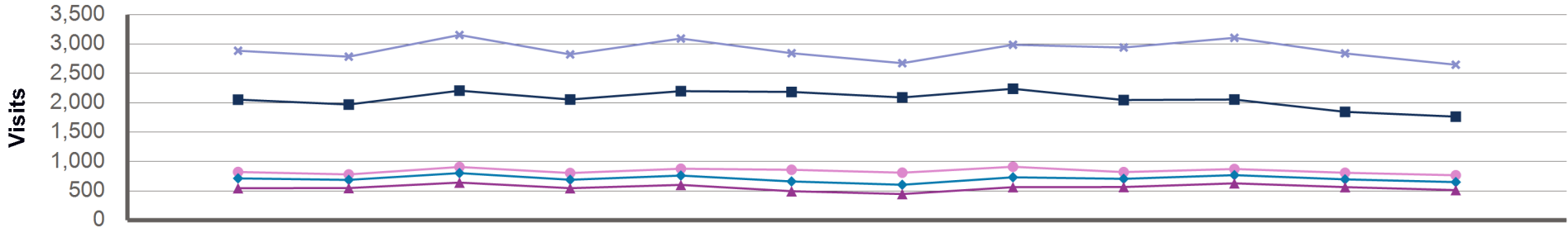
By Age



By Ethnicity



By Population



	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17
Dual	2,053.5	1,970.9	2,206.4	2,056.1	2,198.1	2,185.2	2,091.2	2,238.5	2,047.2	2,055.3	1,846.2	1,764.6
MO-ACA	822.9	781.5	908.3	805.1	877.9	860.9	811.1	911.6	820.9	873.6	809.3	767.3
MO-OTLIC	547.2	549.4	642.5	547.1	602.9	495.9	448.1	564.1	567.1	629.4	565.2	514.4
MO-SPD	2,885.6	2,784.9	3,153.8	2,823.4	3,093.3	2,843.7	2,674.1	2,987.0	2,940.9	3,105.5	2,840.2	2,647.9
MO-Other	714.2	688.7	804.4	690.6	762.0	661.9	605.6	732.7	706.4	768.9	697.4	650.6
Total	986.4	951.0	1,094.6	968.9	1,057.9	979.8	916.5	1,048.7	990.5	1,051.3	957.8	899.2

Source: Enterprise Performance Monitoring System

Note: Data in this dashboard is preliminary and subject to change

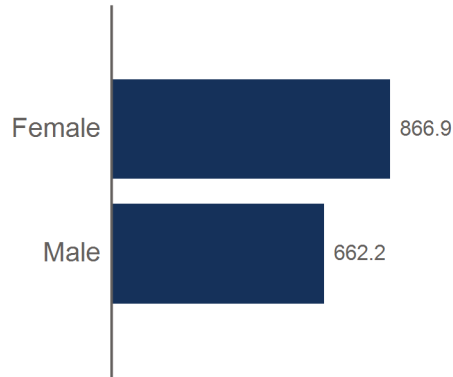
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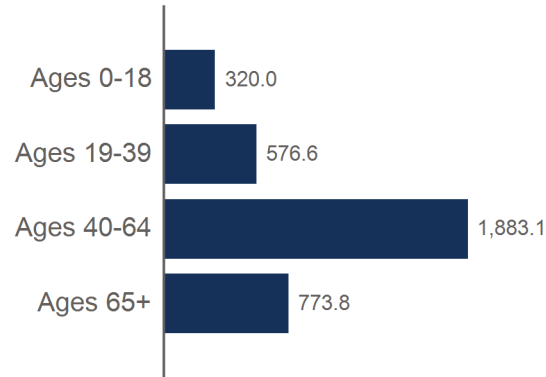


Prescriptions per 1,000 Members (Dec-17)

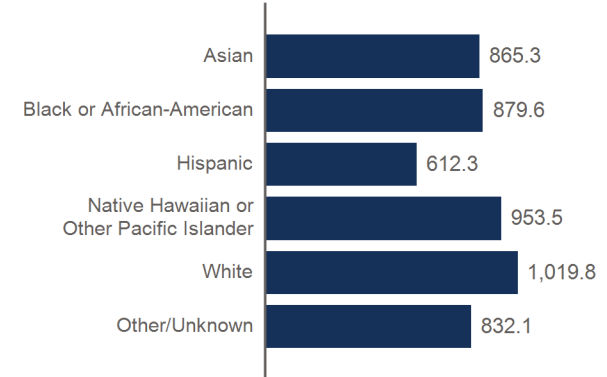
By Sex



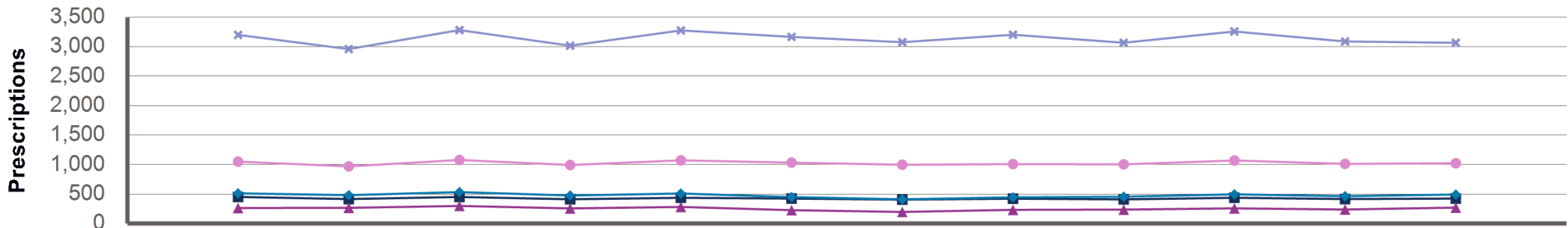
By Age



By Ethnicity



By Population



	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17
Dual	452.6	416.8	451.6	413.7	437.5	425.4	406.4	423.8	411.4	438.3	416.7	425.5
MO-ACA	1,051.7	970.7	1,079.1	994.5	1,072.8	1,034.6	998.6	1,009.2	1,005.4	1,070.8	1,013.1	1,023.8
MO-OTLIC	264.9	268.0	300.2	258.4	283.3	228.1	198.5	233.8	238.2	258.6	239.8	271.7
MO-SPD	3,199.6	2,959.1	3,281.7	3,017.1	3,275.5	3,165.8	3,075.7	3,202.7	3,067.0	3,257.5	3,088.4	3,066.0
MO-Other	513.2	483.0	534.9	476.5	510.4	451.0	412.4	446.2	456.1	497.0	464.6	493.8
Total	798.3	743.3	824.2	749.6	808.1	756.3	718.1	749.7	744.2	797.6	752.4	771.3

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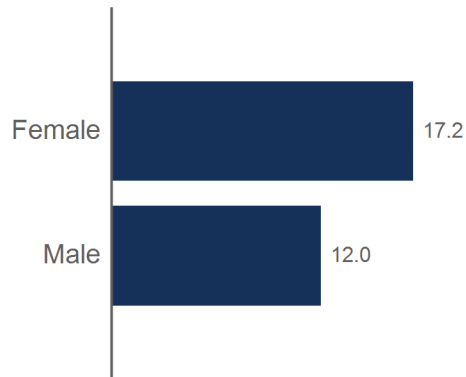
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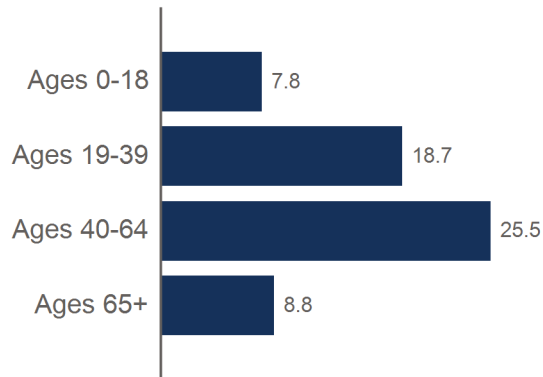


Mild-to-Moderate Mental Health Visits per 1,000 Members (Dec-17)

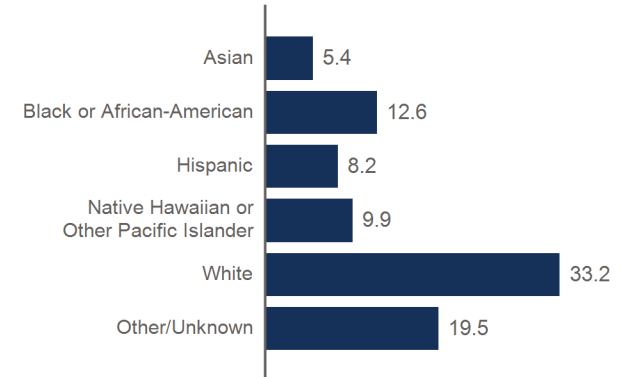
By Sex



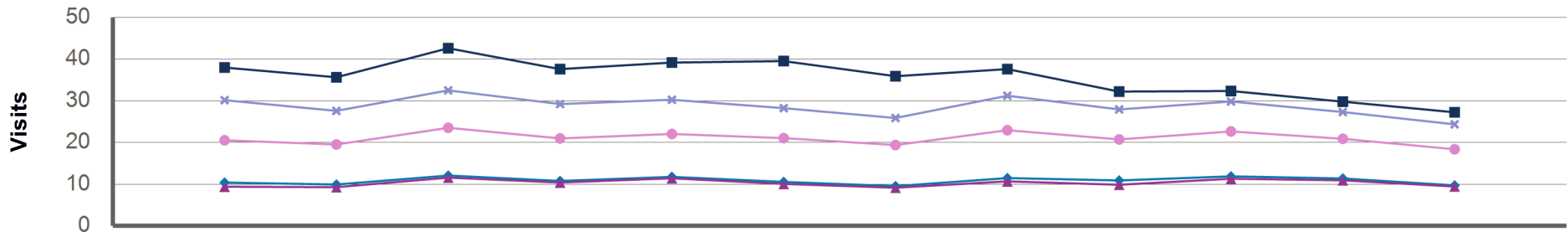
By Age



By Ethnicity



By Population



	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17
Dual	38.0	35.6	42.6	37.6	39.2	39.5	35.9	37.6	32.2	32.3	29.8	27.2
MO-ACA	20.5	19.5	23.5	21.0	22.0	21.0	19.4	22.9	20.7	22.6	20.9	18.4
MO-OTLIC	9.4	9.3	11.6	10.4	11.4	10.1	9.2	10.7	9.9	11.3	10.9	9.4
MO-SPD	30.1	27.6	32.5	29.2	30.2	28.2	25.9	31.2	27.9	29.8	27.3	24.4
MO-Other	10.4	9.9	12.1	10.8	11.8	10.6	9.5	11.5	10.9	11.9	11.4	9.7
Total	16.9	16.1	19.4	17.3	18.4	17.3	15.8	18.4	16.7	18.0	16.8	14.8

Source: Enterprise Performance Monitoring System

Note: Data in this dashboard is preliminary and subject to change

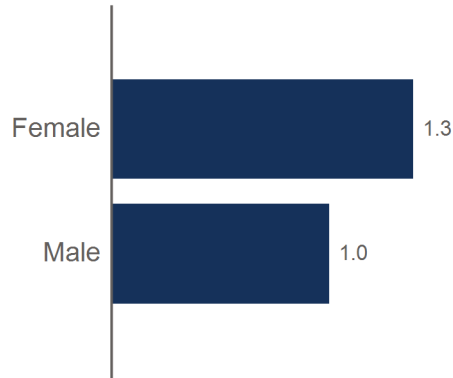
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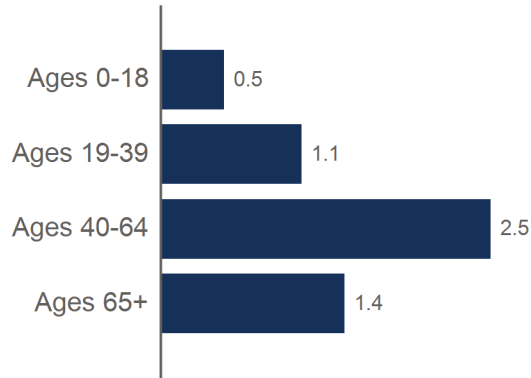


Grievances per 1,000 Member Months (2018Q2)

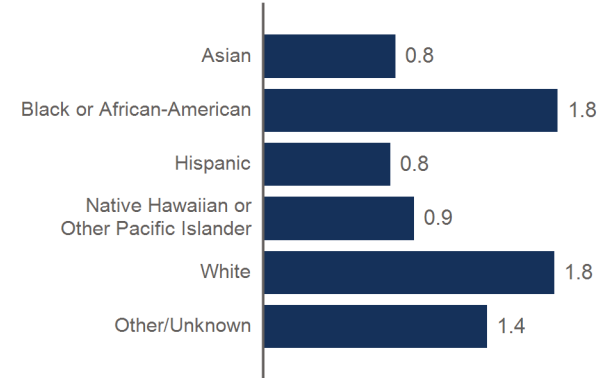
By Sex



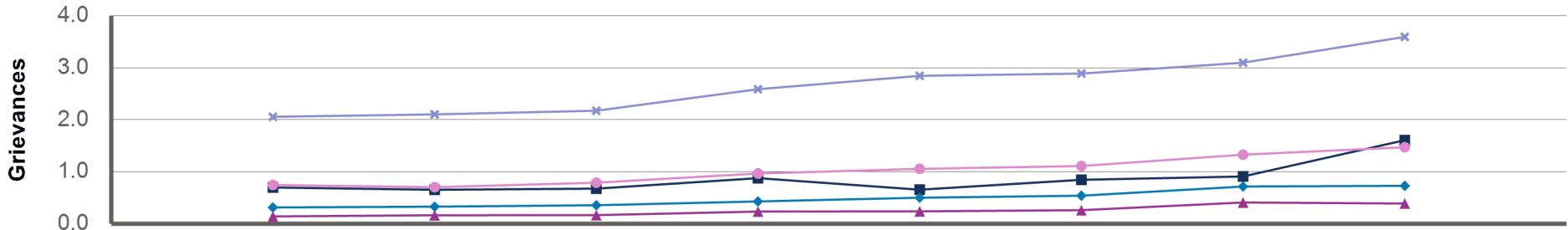
By Age



By Ethnicity



By Population



	2016Q3	2016Q4	2017Q1	2017Q2	2017Q3	2017Q4	2018Q1	2018Q2
Dual	0.7	0.7	0.7	0.9	0.7	0.8	0.9	1.6
MO-ACA	0.7	0.7	0.8	1.0	1.1	1.1	1.3	1.5
MO-OTLIC	0.1	0.2	0.2	0.2	0.2	0.3	0.4	0.4
MO-SPD	2.1	2.1	2.2	2.6	2.8	2.9	3.1	3.6
MO-Other	0.3	0.3	0.4	0.4	0.5	0.5	0.7	0.7
Total	0.6	0.6	0.6	0.7	0.8	0.8	1.0	1.2

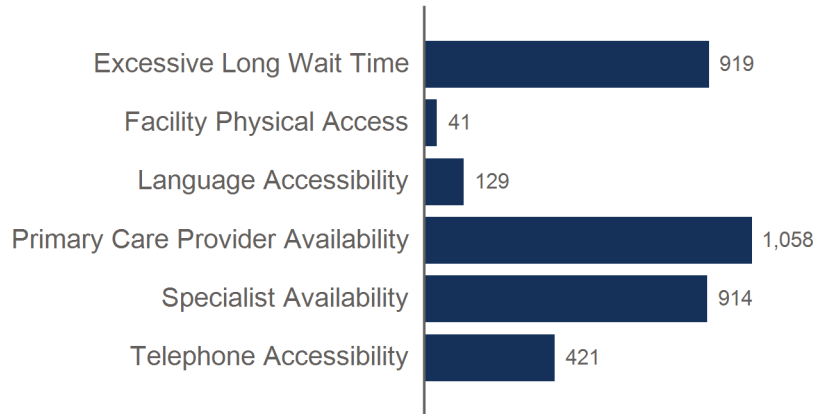
Source: Enterprise Performance Monitoring System
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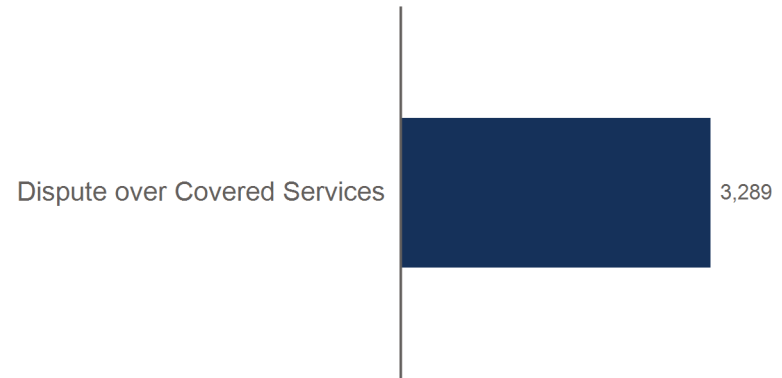


Count of Grievances: Grievance Type (2018Q2)*

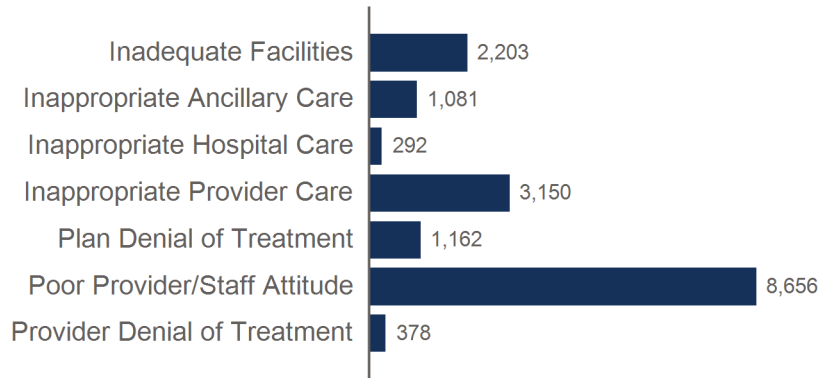
Accessibility



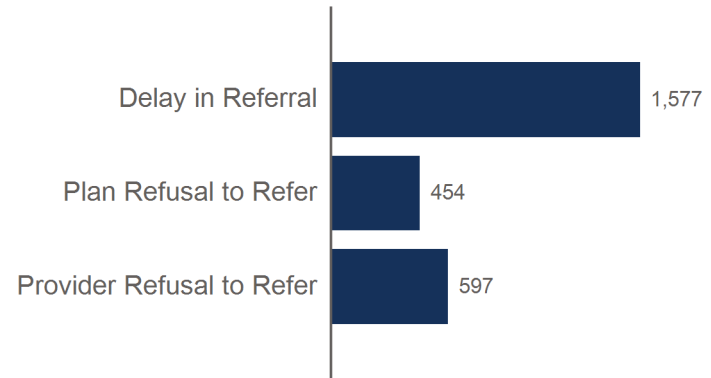
Benefits



Quality of Care



Referral



*There were 13,766 Other Grievances during the quarter that did not fall under one of the above four categories.

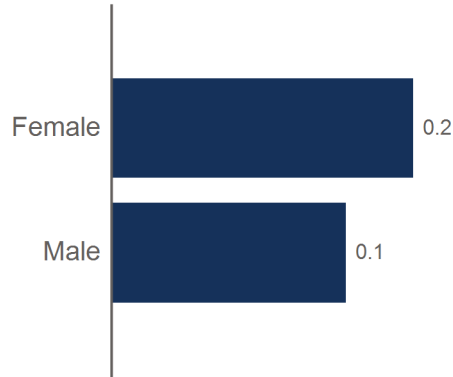
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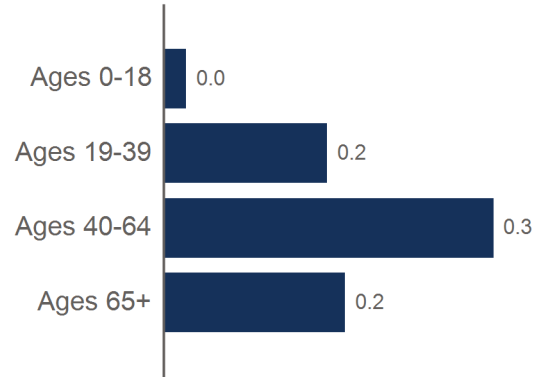


State Fair Hearings per 10,000 Members (Jun-18)

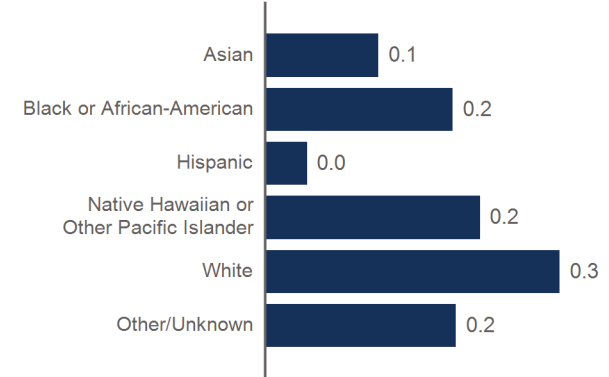
By Sex



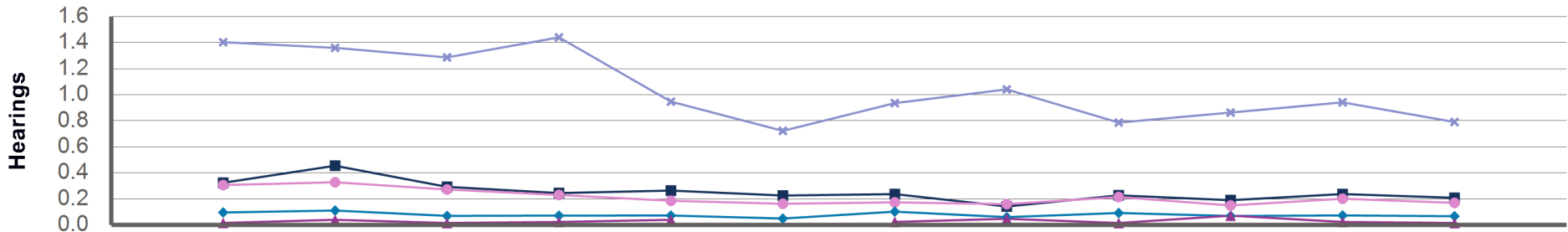
By Age



By Ethnicity



By Population



	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
Dual	0.3	0.5	0.3	0.2	0.3	0.2	0.2	0.1	0.2	0.2	0.2	0.2
MO-ACA	0.3	0.3	0.3	0.2	0.2	0.2	0.2	0.2	0.2	0.2	0.2	0.2
MO-OTLIC	0.0	0.0	0.0	0.0	0.0		0.0	0.0	0.0	0.1	0.0	0.0
MO-SPD	1.4	1.4	1.3	1.4	0.9	0.7	0.9	1.0	0.8	0.9	0.9	0.8
MO-Other	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1
Total	0.2	0.3	0.2	0.2	0.2	0.1	0.2	0.2	0.2	0.2	0.2	0.1

Source: Enterprise Performance Monitoring System
 Note: Data in this dashboard is preliminary and subject to change

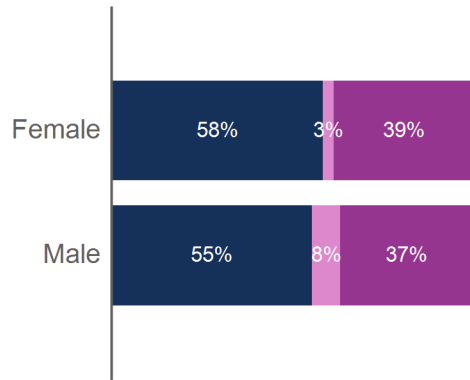
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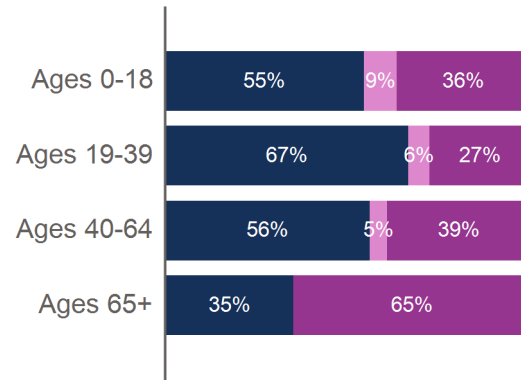
Count of State Fair Hearings: Outcomes (Jun-18)

■ Denied or Dismissed
 ■ Granted
 ■ Withdrawal or Non-Appearence

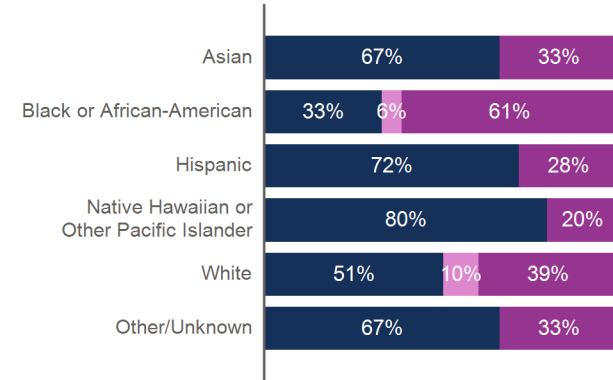
By Sex



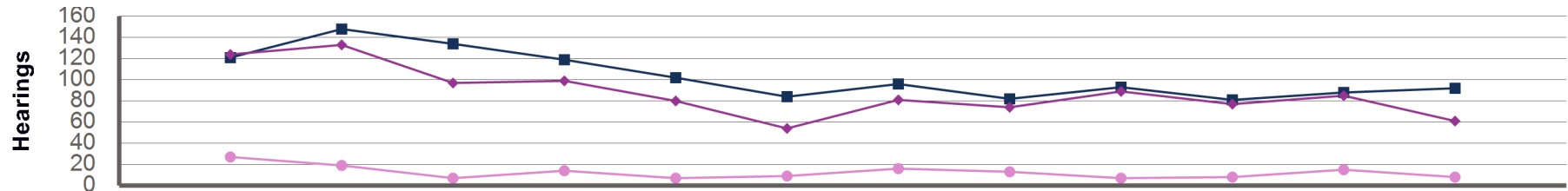
By Age



By Ethnicity



By Outcome



	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
Denied or Dismissed	121	148	134	119	102	84	96	82	93	81	88	92
Granted	27	19	7	14	7	9	16	13	7	8	15	8
Withdrawal or Non-Appearence	124	133	97	99	80	54	81	74	89	77	85	61
Total	272	300	238	232	189	147	193	169	189	166	188	161

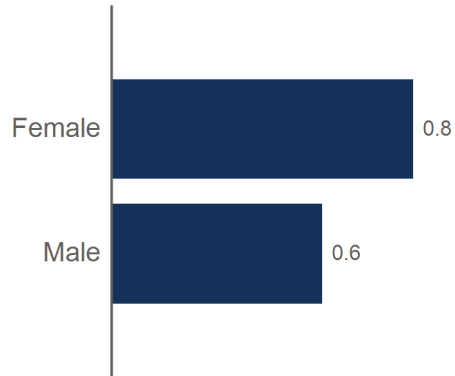
Source: Enterprise Performance Monitoring System
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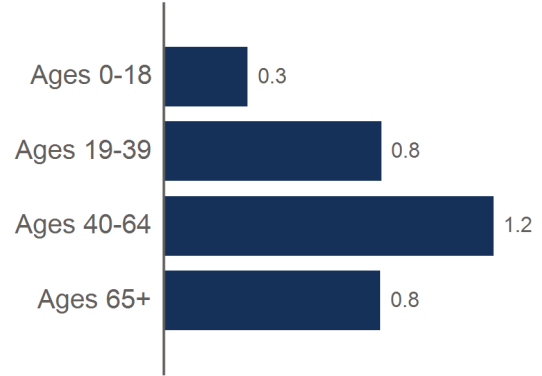


Medical Exemption Requests per 10,000 Members (Jun-18)

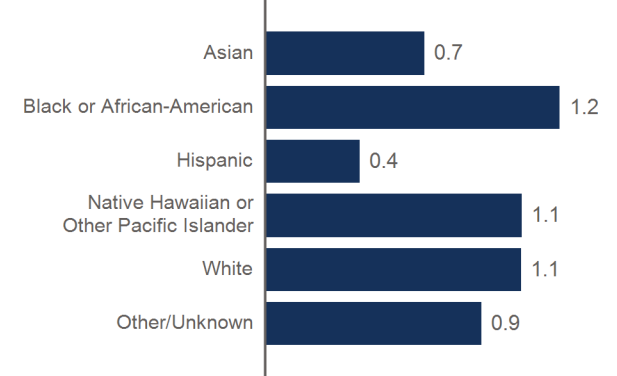
By Sex



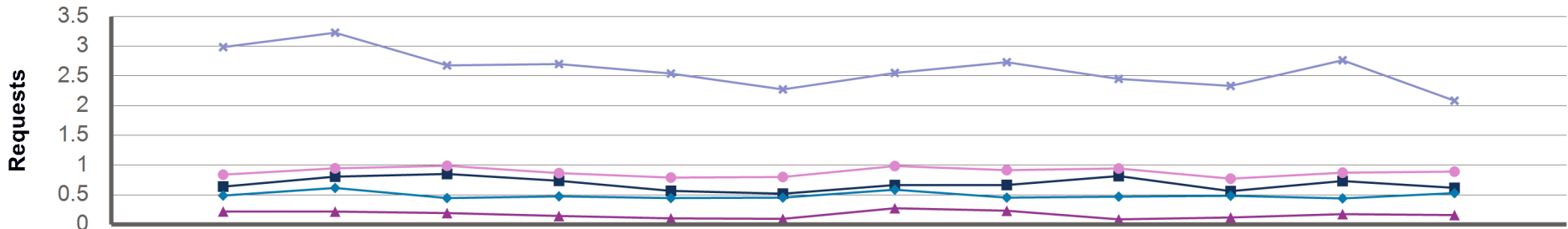
By Age



By Ethnicity



By Population



	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
Dual	0.6	0.8	0.9	0.7	0.6	0.5	0.7	0.7	0.8	0.6	0.7	0.6
MO-ACA	0.8	0.9	1.0	0.9	0.8	0.8	1.0	0.9	0.9	0.8	0.9	0.9
MO-OTLIC	0.2	0.2	0.2	0.1	0.1	0.1	0.3	0.2	0.1	0.1	0.2	0.2
MO-SPD	3.0	3.2	2.7	2.7	2.5	2.3	2.6	2.7	2.4	2.3	2.8	2.1
MO-Other	0.5	0.6	0.4	0.5	0.4	0.5	0.6	0.5	0.5	0.5	0.4	0.5
Total	0.7	0.8	0.7	0.7	0.6	0.6	0.8	0.7	0.7	0.6	0.7	0.7

Source: Enterprise Performance Monitoring System
Note: Data in this dashboard is preliminary and subject to change

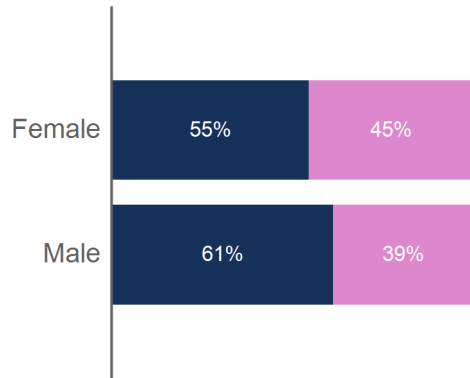
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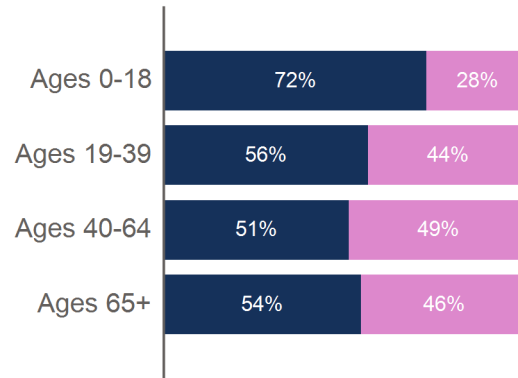
Count of Medical Exemption Requests: Exempt Status (Jun-18)

■ Approved
 ■ Denied

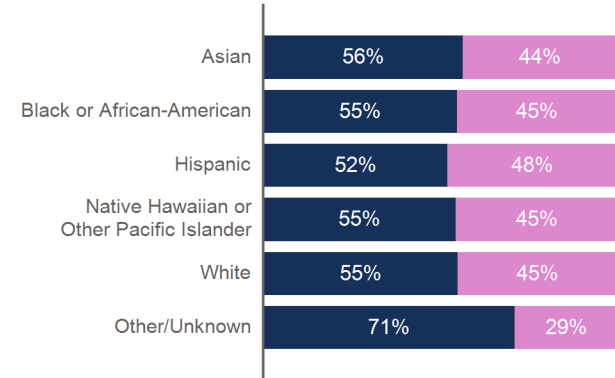
By Sex



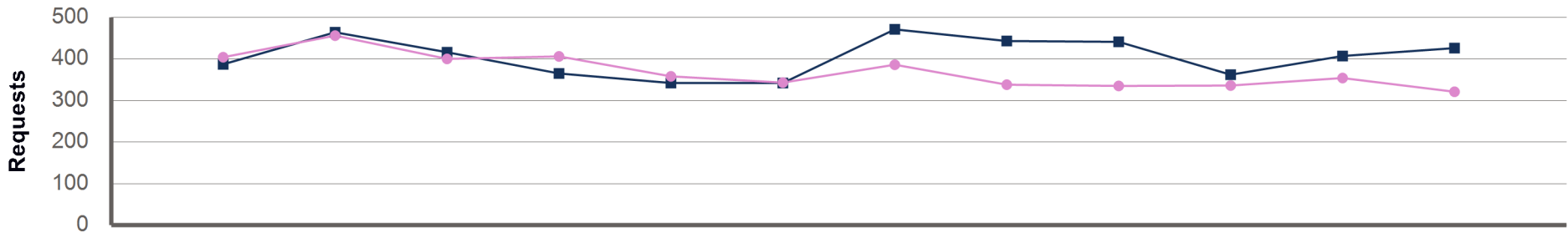
By Age



By Ethnicity



By Exempt Status



	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
Approved	387	464	416	365	342	342	471	443	441	362	407	426
Denied	404	456	400	406	358	343	386	338	335	336	354	321
Total	791	920	816	771	700	685	857	781	776	698	761	747

Source: Enterprise Performance Monitoring System

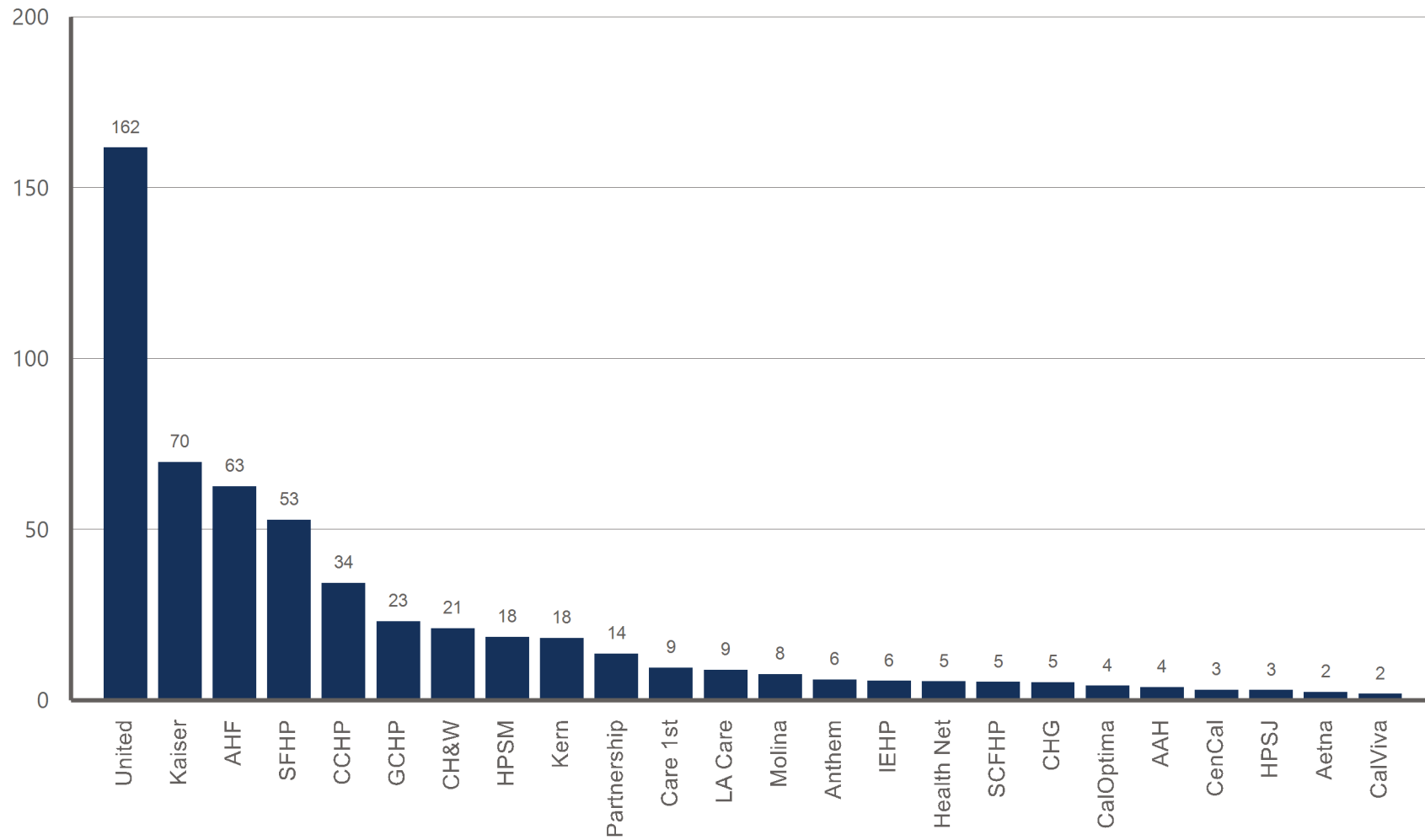
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PCPs per 2,000 Members (Jun-18)

By Plan Parent



*The contractual standard is 1 Primary Care Physician (PCP) per 2,000 plan enrollees.

Source: Enterprise Performance Monitoring System

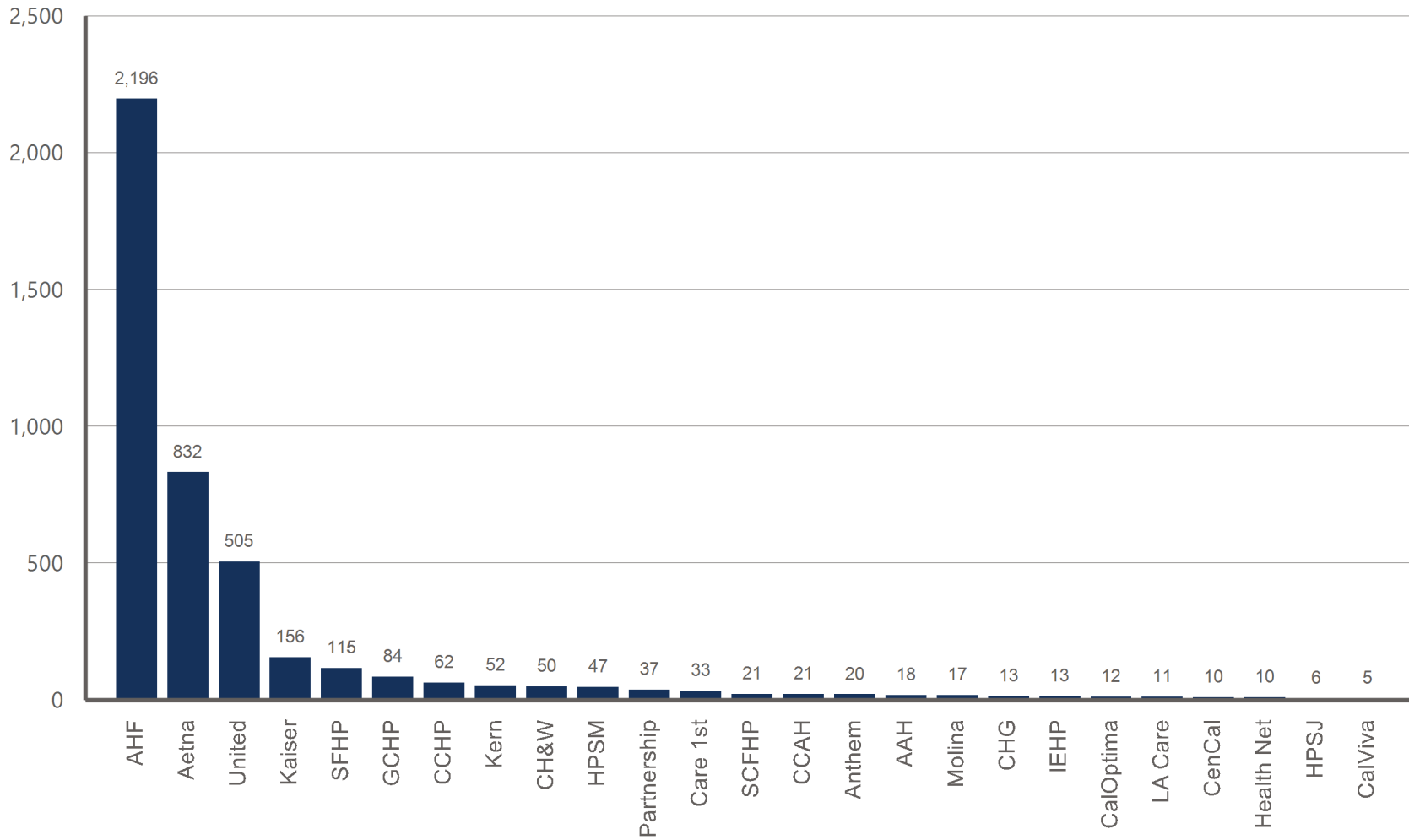
Note: Data in this dashboard is preliminary and subject to change

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Physicians per 1,200 Members (Jun-18)

By Plan Parent



*The contractual standard is 1 Physician per 1,200 plan enrollees.

Source: Enterprise Performance Monitoring System

Note: Data in this dashboard is preliminary and subject to change

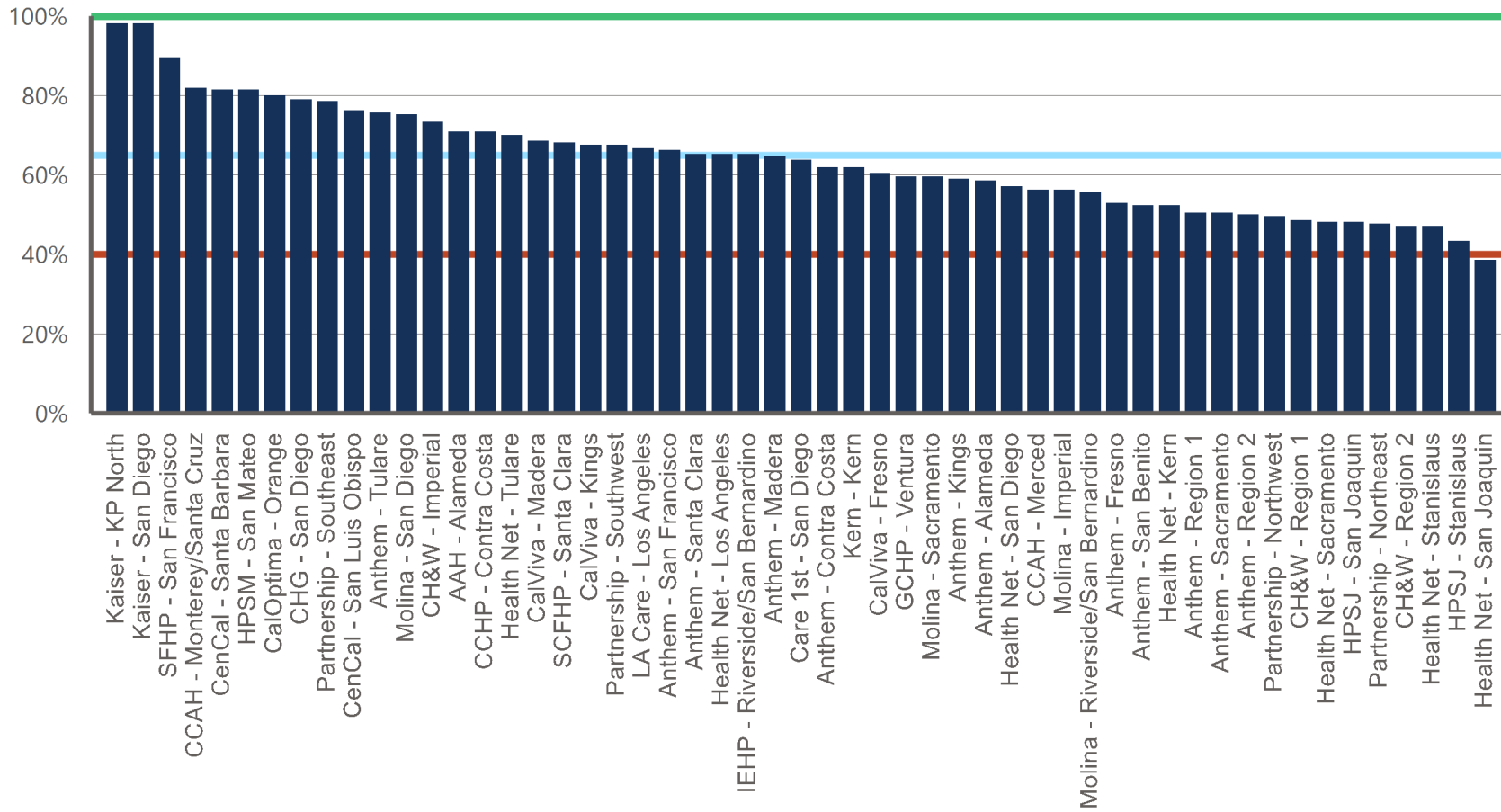
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2018 HEDIS® Aggregated Quality Factor Score (AQFS)

HPL - 100% Weighted Average - 68% MPL - 40%

By HEDIS® Reporting Unit



Source: Enterprise Performance Monitoring System
Note: Data in this dashboard is preliminary and subject to change

GLOSSARY

Metrics

Certified Eligible: A certified eligible is a beneficiary deemed qualified for Medi-Cal services by a valid eligibility determination, and who have enrolled into the program. This classification excludes beneficiaries who have a monthly share-of-cost obligation that has not been met. Enrollment counts exclude information related to applications received or any other eligible members that may be in the process of becoming certified eligible.

Member Month: A member month represent one certified eligible for one month of enrollment. Counts of Member months represent the number of certified eligible individuals enrolled in a health plan or Fee-For-Service each month.

Per 1,000 Members: Rates per 1,000 members were calculated by dividing overall utilization of a given service (e.g., Emergency Room Visits) by the total number of members for the same time period and multiplying the result by 1,000.

Abbreviated Numbers: Numbers in millions (M) that are less than 50,000 are displayed as 0.0M. Numbers in thousands (K) that are less than 50 are displayed as 0.0K.

Percentages: Percentage metrics are displayed as whole numbers. Charts may add up to 99%, 100%, or 101%.

MO-: Indicates Medi-Cal Only. See Non-Dual definition for more information.

Population Aid Code Groups

Affordable Care Act (ACA): This population consists of the following Adult Expansion aid codes: M1, M2, L1, and 7U.

Optional Targeted Low Income Children (OTLIC): This population consists of the following OTLIC aid codes: 2P, 2R, 2S, 2T, 2U, 5C, 5D, E2, E5, E6, E7, H1, H2, H3, H4, H5, M5, T0, T1, T2, T3, T4, T5, T6, T7, T8, and T9.

Seniors and Persons with Disabilities (SPD): This population consists of the following SPD aid codes: 10, 13, 14, 16, 17, 1E, 1H, 20, 23, 24, 26, 27, 2E, 2H, 36, 60, 63, 64, 66, 67, 6A, 6C, 6E, 6G, 6H, 6J, 6N, 6P, 6R, 6V, 6W, 6X, 6Y, C1, C2, C3, C4, C7, C8, D2, D3, D4, D5, D6, and D7.

Other Populations (OTHER): This population consists of all aid codes not categorized under ACA, OTLIC, or SPD.

Medicare Status

Dual: This population consists of any Medi-Cal eligible member who has active Medicare coverage. Active Medicare coverage means one or more of the following Medicare portions are active: Part A, B, or D. Dual members are not identified by an aid code.

Non-Dual: This population consists of any Medi-Cal eligible member who is Medi-Cal Only (MO) and has no active Medicare coverage.

New Enrollments

This population consists of members who were newly eligible for Medi-Cal Managed Care enrollment. The enrollment types are defined below:

Auto Assigned: Members who made no choice that were assigned by default algorithm.

Passive/Prior: Members who were passively enrolled and members defaulted because they were previously a member or because other family members were already assigned to the plan.

Regular: Members who made a choice or selected a health plan by submitting an enrollment form.

Utilization Measures for Certified Eligible Managed Care Members

Utilization is tracked by aid code population and Medicare status.

Emergency Room (ER) Visits: This measure captures the number of ER visits per month. The results from this measure are used to calculate ER visits with an inpatient admission. A visit consists of a unique combination between provider, member, and date of service. This measure is displayed per 1,000 members.

Emergency Room (ER) Visits with an Inpatient (IP) Admission: This measure captures the number of ER visits that resulted in an inpatient admission per month. The results of this measure are a subset of ER visits and IP admissions. The service date and member identification are linked to create this measure. An admission consists of a unique combination between member and date of admission to a facility. This measure is displayed per 1,000 members.

Inpatient (IP) Admissions: This measure captures the number of inpatient admissions per month. The results from this measure are used to calculate ER visits with an inpatient admission. An admission consists of a unique combination between member and date of admission to a facility. This measure is displayed per 1,000 members.

Outpatient (OP) Visits: This measure captures the number of outpatient visits per month. A visit consists of a unique combination between provider, member, and date of service. This measure is displayed per 1,000 members.

Prescriptions: This measure captures the number of prescriptions per month. A prescription consists of a unique combination between National Drug Code, member, and date of service. This measure is displayed per 1,000 members.

Mild to Moderate Mental Health Visits: This measure captures the number of visits per month related to selected Psychotherapy Services and Diagnostic Evaluations. The selected procedure codes aim to capture mild to moderate mental health visits. A visit consists of a unique combination between provider, member, and date of service. This measure is displayed per 1,000 members.

Grievances, State Fair Hearings, and Medical Exemption Requests

Grievances: Grievance data is collected quarterly and is plan reported. A single member can have multiple grievances, and a single grievance can have multiple reasons. Grievance reasons include Accessibility, Benefits, Quality of Care, and Referral. The count of grievances that do not fall into one of the above mentioned categories will be noted as “Other”.

State Fair Hearings: Hearing data is reported from the Department of Social Services. Hearing outcomes have been grouped into three outcomes types: Denied or Dismissed, Granted, and Withdrawal or Non-Appearance.

Medical Exemption Requests (MERs): A MER is a request to be exempt from mandatory enrollment into a Managed Care health plan. If a MER is approved a beneficiary can stay in Medi-Cal fee-for-service for a period of 12 months. If a MER is denied a member is required to enroll into a Managed Care health plan.

Network Adequacy

Provider Ratios: These metrics are designed to showcase the number of Primary Care Physicians (PCPs) per 2,000 plan enrollees and all Physicians per 1,200 plan enrollees.

Health Effectiveness Data and Information Set (HEDIS®) Aggregated Quality Factor Score (AQFS)

The HEDIS® measures and specifications were developed by and are owned and copyrighted by the National Committee for Quality Assurance (“NCQA”). The HEDIS® AQFS is a single score that accounts for plan performance on all DHCS selected 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 State Population Weighted Average is calculated annually. A HEDIS® reporting unit is a combination of one health plan in a county or region.