

CMSP Data Update: Butte County - December 2009

1. CMSP Enrollment Trends
2. Health Care Utilization Trends

Data Definitions

Eligibles, Enrollees, or Members: All individuals enrolled in CMSP regardless if they use services

Fiscal Year: July through June

Using Members or Utilizers: Individuals enrolled in CMSP that have had medical, dental, or pharmacy claims paid on their behalf

Amount Paid and Claims Payment Amount: Money paid to providers by CMSP based on either Date of Service (DOS) or Month of Payment

Provider Types:

Ambulance - Includes air and ground transportation claims

Clinic - Includes medical and dental claims for Rural Health Clinics, Federally Qualified Health Centers & Tribal Health Program providers

Dentist - Includes claims paid through Doral Dental (Anthem Blue Cross sub-contractor)

Home Health/ DME - Includes claims for home health and durable medical equipment not dispensed through a retail pharmacy

Hospital Inpatient - Includes acute care hospitals and inpatient mental health claims

Hospital Outpatient - Includes hospital outpatient services claims, such as physical therapy, radiology, etc.

Pharmacy - Includes claims paid through MedImpact (CMSP's Pharmacy Benefit Manager)

Physician/ Medical - Includes physician and physician group claims

Special Facility - Includes facilities such as adult day health care centers, blood banks & hospice

Data Sources

- Anthem Blue Cross Paid Claims Data is compiled through the June 2009 monthly file, allowing for a minimum of a 6-month “look back” period from Date of Payment to Date of Service.
- Doral Dental Paid Claims Data is compiled through the July 2009 monthly file.
- MedImpact Pharmacy Paid Claims Data is compiled through 2nd quarter 2008 as of September 2009.
- FAME Eligibility Data uses the previous month 2 through 12 fields from files ending with October 2009.
- Note: FY 2006-07 data has been refreshed since data reports supplied at the October 2008 Strategic Planning Meeting.

**CMSP - Butte County
Eligibility by Aid Code**

	Jul-06	Aug-06	Sep-06	Oct-06	Nov-06	Dec-06	Jan-07	Feb-07	Mar-07	Apr-07	May-07	Jun-07
50	46	48	44	47	44	43	46	52	57	51	45	45
8F	2	3	2	-	1	3	3	3	3	3	4	2
84	2,844	2,925	2,849	2,863	2,943	2,990	3,076	3,201	3,411	3,313	3,324	3,310
85	559	579	571	557	564	544	545	565	619	569	568	585
88	314	310	282	282	272	271	294	293	318	318	329	353
89	37	41	37	40	36	34	33	36	41	40	43	46
Total	3,802	3,906	3,785	3,789	3,860	3,885	3,997	4,150	4,449	4,294	4,313	4,341
	Jul-07	Aug-07	Sep-07	Oct-07	Nov-07	Dec-07	Jan-08	Feb-08	Mar-08	Apr-08	May-08	Jun-08
50	48	64	54	46	49	45	45	52	45	37	46	43
8F	3	3	6	6	6	4	3	3	2	1	1	3
84	3,250	3,304	3,201	3,137	3,077	3,003	3,068	3,085	3,172	3,175	3,216	3,287
85	589	619	577	595	544	530	488	520	543	524	515	522
88	355	378	381	375	404	404	428	449	444	410	376	391
89	48	44	45	51	52	55	52	60	52	51	44	40
Total	4,293	4,412	4,264	4,210	4,132	4,041	4,084	4,169	4,258	4,198	4,198	4,286
	Jul-08	Aug-08	Sep-08	Oct-08	Nov-08	Dec-08	Jan-09	Feb-09	Mar-09	Apr-09	May-09	Jun-09
50	38	43	42	47	52	53	53	51	51	42	47	54
8F	4	4	4	4	4	3	4	3	3	4	8	9
84	3,223	3,178	3,207	3,131	3,182	3,221	3,310	3,433	3,598	3,527	3,567	3,557
85	524	564	578	568	576	569	574	584	638	635	646	653
88	407	439	428	431	434	446	470	473	506	473	467	506
89	39	44	48	51	48	48	63	61	68	62	70	79
Total	4,235	4,272	4,307	4,232	4,296	4,340	4,474	4,605	4,864	4,743	4,805	4,858

Aid Code Descriptions:

- 50 - Emergency services only. Cannot verify their citizenship (undocumented members)
- 8F - Acute inpatient benefits only. Eligible for CMSP but have been placed into a skilled nursing care and are dually enrolled in Medi-Cal (aid code 53).
- 84 - Full scope benefit with no share of cost
- 85 - Full scope benefit with share of cost
- 88 - Full scope benefit with no share of cost AND state disability application pending
- 89 - Full scope benefit with share of cost AND state disability application pending

**CMSP FY 2006-07 and FY 2007-08
Using Members and Expenditures by Provider Type**

Fiscal Year	Provider Type	BUTTE COUNTY		ALL CMSP COUNTIES	
		Using Members	Total Amount Paid	Using Members	Total Amount Paid
FY 2006-07	AMBULANCE	611	\$ 207,580	5,462	\$ 2,594,952
FY 2006-07	CLINIC	4,006	\$ 2,977,281	35,726	\$ 23,375,726
FY 2006-07	DENTAL	440	\$ 150,968	7,251	\$ 2,704,351
FY 2006-07	HOME HEALTH/ DME	305	\$ 201,190	2,329	\$ 2,439,492
FY 2006-07	HOSPITAL INPATIENT	795	\$ 8,988,353	7,749	\$ 100,381,246
FY 2006-07	HOSPITAL OUTPATIENT	4,030	\$ 1,889,873	36,993	\$ 16,659,526
FY 2006-07	PHARMACY*	4,514	\$ 3,944,442	43,933	\$ 31,797,126
FY 2006-07	PHYSICIAN/ MEDICAL	4,232	\$ 2,131,962	44,187	\$ 25,102,487
FY 2006-07	SPECIAL FACILITY	15	\$ 8,697	758	\$ 248,332
FY 2006-07	Total		\$ 20,500,346		\$ 205,303,238
Fiscal Year	Provider Type	Using Members	Total Amount Paid	Using Members	Total Amount Paid
FY 2007-08	AMBULANCE	605	\$ 238,058	5,970	\$ 2,729,313
FY 2007-08	CLINIC	4,345	\$ 3,121,052	38,514	\$ 26,549,962
FY 2007-08	DENTAL	508	\$ 206,353	8,223	\$ 3,292,370
FY 2007-08	HOME HEALTH/ DME	333	\$ 302,158	2,421	\$ 2,080,165
FY 2007-08	HOSPITAL INPATIENT	771	\$ 10,166,801	7,541	\$ 102,230,075
FY 2007-08	HOSPITAL OUTPATIENT	4,344	\$ 2,071,826	40,225	\$ 19,423,874
FY 2007-08	PHARMACY	4,732	\$ 3,834,070	45,631	\$ 33,168,625
FY 2007-08	PHYSICIAN/ MEDICAL	4,566	\$ 2,603,186	47,261	\$ 29,582,298
FY 2007-08	SPECIAL FACILITY	18	\$ 8,525	745	\$ 242,263
FY 2007-08	Total		\$ 22,552,029		\$ 219,298,945

Data Source: CMSP Paid Claims by Date of Service (excluding Vision claims)

* Estimated actual pharmacy expenditures in FY 2006-07 pending updated dataset

**CMSP FY 2006-07 and FY 2007-08
Using Members and Expenditures by AID CODE
BUTTE COUNTY**

FY2006/07				FY2007/08			
AC	MBR	CLAIMS	PAID	AC	MBR	CLAIMS	PAID
50	60	392	\$ 277,551	50	50	504	\$ 305,978
8F	8	94	\$ 49,748	8F	10	96	\$ 70,356
84	4,445	57,289	\$ 11,317,412	84	4,758	57,800	\$ 11,764,673
85	627	5,185	\$ 1,810,130	85	600	4,484	\$ 1,915,037
88	618	8,631	\$ 2,372,539	88	873	11,816	\$ 3,512,935
89	73	943	\$ 577,557	89	94	1,134	\$ 942,626
	5,831	72,534	\$ 16,404,937		6,385	75,834	\$ 18,511,605

Data Source: CMSP Paid Claims by Date of Service (excluding Pharmacy, Dental, and Vision claims)

CMSP - December 2009

CMSP
Expenditures by Major Diagnostic Grouping
BUTTE

	FY2006/07	FY2007/08
CIRCULATORY SYSTEM	\$ 1,778,829	\$ 2,319,092
DIGESTIVE SYSTEM	\$ 2,675,717	\$ 2,816,107
ENDOCRINE, NUTRITIONAL & METABOLIC	\$ 756,072	\$ 746,141
GENITOURINARY SYSTEM	\$ 558,157	\$ 655,587
ILL-DEFINED CONDITIONS	\$ 1,550,960	\$ 1,569,660
INFECTIOUS & PARASITIC DISEASES	\$ 467,256	\$ 1,134,382
INJURY & POISONING	\$ 3,158,174	\$ 2,775,498
MENTAL DISORDERS	\$ 323,018	\$ 522,132
MUSCULOSKELETAL & CONNECTIVE TISSUE	\$ 1,281,007	\$ 1,576,791
NEOPLASMS	\$ 810,077	\$ 1,011,483
NERVOUS SYSTEM & SENSE ORGANS	\$ 360,695	\$ 575,224
OTHER	\$ 155,136	\$ 255,079
RESPIRATORY SYSTEM	\$ 1,080,392	\$ 955,680
SKIN & SUBCUTANEOUS TISSUE	\$ 537,755	\$ 509,574
V CODES	\$ 911,691	\$ 1,089,178
	<u>\$ 16,404,936</u>	<u>\$ 18,511,608</u>

Data Source: CMSP Paid Claims by Date of Service (excluding Retroactive Medi-Cal Recoveries, Pharmacy, Dental and Vision claims)