

CMSP Data Update: Glenn 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 - Glenn 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	18	23	11	7	9	10	10	10	7	8	8	10
8F	-	-	-	-	-	-	-	-	-	-	-	-
84	222	228	217	214	194	205	213	215	215	215	221	212
85	61	61	61	53	60	60	63	63	62	63	65	67
88	52	47	40	40	32	32	33	40	40	42	42	41
89	10	8	8	4	8	10	14	11	13	12	9	7
Total	363	367	337	318	303	317	333	339	337	340	345	337

	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	9	6	6	8	10	12	12	11	15	13	9	10
8F	-	-	-	-	-	1	1	1	1	1	1	1
84	204	215	201	199	202	185	185	186	198	202	201	204
85	69	56	55	54	56	62	62	70	73	67	73	64
88	42	38	37	33	30	32	29	33	39	38	32	38
89	6	7	6	4	5	5	5	9	7	5	6	9
Total	330	322	305	298	303	297	294	310	333	326	322	326

	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	9	10	9	7	11	10	7	10	9	9	11	14
8F	1	-	-	-	-	1	1	-	-	-	-	1
84	215	228	232	229	247	251	253	258	275	269	281	258
85	69	67	62	64	59	57	60	66	78	81	81	88
88	34	34	26	29	26	34	39	33	38	38	31	33
89	11	9	7	8	8	8	9	9	6	6	8	10
Total	339	348	336	337	351	361	369	376	406	403	412	404

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	GLENN COUNTY		ALL CMSP COUNTIES	
		Using Members	Total Amount Paid	Using Members	Total Amount Paid
FY 2006-07	Ambulance	41	\$ 19,176	5,462	\$ 2,594,952
FY 2006-07	Clinic	372	\$ 240,423	35,726	\$ 23,375,726
FY 2006-07	Dentist	11	\$ 3,998	7,251	\$ 2,704,351
FY 2006-07	Home Health/ DME	32	\$ 24,829	2,329	\$ 2,439,492
FY 2006-07	Hospital Inpatient	56	\$ 999,865	7,749	\$ 100,381,246
FY 2006-07	Hospital Outpatient	267	\$ 120,265	36,993	\$ 16,659,526
FY 2006-07	Pharmacy*	379	\$ 282,184	43,933	\$ 31,797,126
FY 2006-07	Physician/ Medical	344	\$ 199,444	44,187	\$ 25,102,487
FY 2006-07	Special Facility	8	\$ 853	758	\$ 248,332
FY 2006-07	Total		\$ 1,891,037		\$ 205,303,238
Fiscal Year	Provider Type	Using Members	Total Amount Paid	Using Members	Total Amount Paid
FY 2007-08	Ambulance	47	\$ 22,929	5,970	\$ 2,729,313
FY 2007-08	Clinic	335	\$ 229,831	38,514	\$ 26,549,962
FY 2007-08	Dentist	22	\$ 9,040	8,223	\$ 3,292,370
FY 2007-08	Home Health/ DME	23	\$ 22,964	2,421	\$ 2,080,165
FY 2007-08	Hospital Inpatient	48	\$ 523,066	7,541	\$ 102,230,075
FY 2007-08	Hospital Outpatient	289	\$ 152,864	40,225	\$ 19,423,874
FY 2007-08	Pharmacy	355	\$ 273,053	45,631	\$ 33,168,625
FY 2007-08	Physician/ Medical	335	\$ 192,996	47,261	\$ 29,582,298
FY 2007-08	Special Facility	3	\$ 1,147	745	\$ 242,263
FY 2007-08	Total		\$ 1,427,890		\$ 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
GLENN COUNTY**

FY2006/07			
AC	MBR	CLAIMS	PAID
50	8	88	\$ 193,084
8F	-	-	\$ -
84	342	3,587	\$ 672,077
85	47	292	\$ 153,071
88	107	1,427	\$ 486,743
89	14	181	\$ 99,881
	518	5,575	\$ 1,604,856

FY2007/08			
AC	MBR	CLAIMS	PAID
50	15	129	\$ 82,303
8F	1	26	\$ 13,998
84	306	3,815	\$ 586,493
85	67	445	\$ 133,786
88	99	1,063	\$ 210,903
89	12	164	\$ 118,314
	500	5,642	\$ 1,145,797

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

CMSP - December 2009

CMSP
Expenditures by Major Diagnostic Grouping
GLENN

	FY2006/07	FY2007/08
CIRCULATORY SYSTEM	\$ 198,188	\$ 159,545
DIGESTIVE SYSTEM	\$ 166,760	\$ 101,385
ENDOCRINE, NUTRITIONAL & METABOLIC	\$ 50,831	\$ 52,955
GENITOURINARY SYSTEM	\$ 39,659	\$ 39,548
ILL-DEFINED CONDITIONS	\$ 103,569	\$ 105,778
INFECTIOUS & PARASITIC DISEASES	\$ 118,458	\$ 12,152
INJURY & POISONING	\$ 243,329	\$ 181,025
MENTAL DISORDERS	\$ 48,745	\$ 41,614
MUSCULOSKELETAL & CONNECTIVE TISSUE	\$ 148,262	\$ 94,287
NEOPLASMS	\$ 192,133	\$ 111,328
NERVOUS SYSTEM & SENSE ORGANS	\$ 88,100	\$ 31,192
OTHER	\$ 3,864	\$ 18,562
RESPIRATORY SYSTEM	\$ 58,000	\$ 49,007
SKIN & SUBCUTANEOUS TISSUE	\$ 39,647	\$ 16,819
V CODES	\$ 105,310	\$ 130,600
	<u>\$ 1,604,855</u>	<u>\$ 1,145,797</u>

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