

CMSP Data Update: Kings 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 - Kings 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	85	84	86	93	101	91	83	95	88	84	68	65
8F	1	1	1	1	1	2	2	2	2	2	2	2
84	1,492	1,522	1,443	1,450	1,425	1,415	1,474	1,451	1,519	1,463	1,467	1,495
85	269	281	285	268	257	225	231	235	275	253	270	268
88	12	7	15	18	15	13	15	15	16	14	12	13
89	2	2	-	-	1	2	2	1	1	1	2	1
Total	1,861	1,897	1,830	1,830	1,800	1,748	1,807	1,799	1,901	1,817	1,821	1,844
	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	80	78	63	66	73	78	78	74	62	50	55	46
8F	2	2	2	2	2	2	1	1	1	1	2	2
84	1,421	1,466	1,441	1,477	1,501	1,496	1,571	1,625	1,690	1,639	1,620	1,613
85	263	256	234	228	215	213	238	260	270	253	231	238
88	7	9	12	14	12	12	10	9	11	13	12	10
89	1	1	1	2	3	3	2	3	6	5	3	2
Total	1,774	1,812	1,753	1,789	1,806	1,804	1,900	1,972	2,040	1,961	1,923	1,911
	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	40	48	58	68	55	48	55	65	72	69	58	56
8F	2	3	3	3	3	3	3	2	2	2	2	2
84	1,582	1,578	1,558	1,607	1,619	1,615	1,620	1,621	1,717	1,678	1,706	1,721
85	229	262	278	292	264	258	268	291	311	301	278	260
88	12	15	14	12	10	11	9	10	5	6	7	14
89	3	3	3	-	1	1	2	1	1	1	1	1
Total	1,868	1,909	1,914	1,982	1,952	1,936	1,957	1,990	2,108	2,057	2,052	2,054

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	KINGS COUNTY		ALL CMSP COUNTIES	
		Using Members	Total Amount Paid	Using Members	Total Amount Paid
FY 2006-07	AMBULANCE	219	\$ 81,542	5,462	\$ 2,594,952
FY 2006-07	CLINIC	1,777	\$ 2,545,079	35,726	\$ 23,375,726
FY 2006-07	DENTAL	343	\$ 117,146	7,251	\$ 2,704,351
FY 2006-07	HOME HEALTH/ DME	93	\$ 98,472	2,329	\$ 2,439,492
FY 2006-07	HOSPITAL INPATIENT	259	\$ 1,855,121	7,749	\$ 100,381,246
FY 2006-07	HOSPITAL OUTPATIENT	1,630	\$ 666,543	36,993	\$ 16,659,526
FY 2006-07	PHARMACY*	1,858	\$ 1,113,827	43,933	\$ 31,797,126
FY 2006-07	PHYSICIAN/ MEDICAL	1,607	\$ 800,157	44,187	\$ 25,102,487
FY 2006-07	SPECIAL FACILITY	11	\$ 7,568	758	\$ 248,332
FY 2006-07	Total		\$ 7,285,455		\$ 205,303,238
Fiscal Year	Provider Type	Using Members	Total Amount Paid	Using Members	Total Amount Paid
FY 2007-08	AMBULANCE	224	\$ 81,091	5,970	\$ 2,729,313
FY 2007-08	CLINIC	1,847	\$ 2,855,389	38,514	\$ 26,549,962
FY 2007-08	DENTAL	380	\$ 106,711	8,223	\$ 3,292,370
FY 2007-08	HOME HEALTH/ DME	93	\$ 72,759	2,421	\$ 2,080,165
FY 2007-08	HOSPITAL INPATIENT	267	\$ 1,842,138	7,541	\$ 102,230,075
FY 2007-08	HOSPITAL OUTPATIENT	1,685	\$ 765,674	40,225	\$ 19,423,874
FY 2007-08	PHARMACY	1,921	\$ 1,399,339	45,631	\$ 33,168,625
FY 2007-08	PHYSICIAN/ MEDICAL	1,686	\$ 946,431	47,261	\$ 29,582,298
FY 2007-08	SPECIAL FACILITY	11	\$ 7,405	745	\$ 242,263
FY 2007-08	Total		\$ 8,076,937		\$ 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
KINGS COUNTY**

FY2006/07				FY2007/08			
AC	MBR	CLAIMS	PAID	AC	MBR	CLAIMS	PAID
50	64	629	\$ 316,839	50	63	443	\$ 203,311
8F	1	4	\$ 529	8F	2	30	\$ 15,989
84	1,954	24,973	\$ 4,829,573	84	2,033	28,308	\$ 5,701,093
85	290	2,132	\$ 666,495	85	270	2,092	\$ 521,776
88	42	576	\$ 240,027	88	26	415	\$ 121,668
89	3	8	\$ 1,021	89	3	21	\$ 7,049
	2,354	28,322	\$ 6,054,484		2,397	31,309	\$ 6,570,886

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

CMSP - December 2009

**CMSP
Expenditures by Major Diagnostic Grouping
KINGS**

	FY2006/07	FY2007/08
CIRCULATORY SYSTEM	\$ 848,616	\$ 591,479
DIGESTIVE SYSTEM	\$ 688,129	\$ 881,727
ENDOCRINE, NUTRITIONAL & METABOLIC	\$ 472,592	\$ 505,293
GENITOURINARY SYSTEM	\$ 261,974	\$ 325,752
ILL-DEFINED CONDITIONS	\$ 578,956	\$ 629,703
INFECTIOUS & PARASITIC DISEASES	\$ 306,121	\$ 276,709
INJURY & POISONING	\$ 479,787	\$ 554,333
MENTAL DISORDERS	\$ 211,170	\$ 180,092
MUSCULOSKELETAL & CONNECTIVE TISSUE	\$ 832,959	\$ 979,853
NEOPLASMS	\$ 268,263	\$ 400,200
NERVOUS SYSTEM & SENSE ORGANS	\$ 203,384	\$ 267,703
OTHER	\$ 119,959	\$ 50,507
RESPIRATORY SYSTEM	\$ 365,458	\$ 452,370
SKIN & SUBCUTANEOUS TISSUE	\$ 199,754	\$ 196,574
V CODES	\$ 217,359	\$ 278,590
	<u>\$ 6,054,481</u>	<u>\$ 6,570,885</u>

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