

CMSP Data Update: Lassen 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 - Lassen 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 | 5 | 3 | 8 | 6 | 6 | 7 | 5 | 7 | 6 | 4 | 5 | 6 |
| 8F | - | - | - | - | - | - | - | - | - | - | - | - |
| 84 | 295 | 291 | 257 | 251 | 251 | 268 | 280 | 283 | 296 | 284 | 285 | 281 |
| 85 | 60 | 52 | 48 | 50 | 47 | 45 | 50 | 50 | 60 | 54 | 46 | 42 |
| 88 | 79 | 89 | 91 | 98 | 99 | 93 | 83 | 81 | 82 | 77 | 81 | 75 |
| 89 | 3 | 3 | 2 | 4 | 4 | 5 | 9 | 10 | 9 | 4 | 4 | 5 |
| Total | 442 | 438 | 406 | 409 | 407 | 418 | 427 | 431 | 453 | 423 | 421 | 409 |
| | 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 | 7 | 9 | 6 | 3 | 2 | 4 | 4 | 3 | 4 | 1 | 2 | 3 |
| 8F | - | - | - | - | - | - | - | - | - | - | - | - |
| 84 | 281 | 293 | 294 | 313 | 319 | 317 | 330 | 331 | 343 | 332 | 324 | 314 |
| 85 | 40 | 40 | 41 | 42 | 47 | 45 | 50 | 58 | 58 | 49 | 51 | 48 |
| 88 | 73 | 70 | 68 | 72 | 70 | 72 | 74 | 70 | 70 | 65 | 53 | 50 |
| 89 | 6 | 5 | 7 | 8 | 9 | 7 | 8 | 6 | 7 | 4 | 4 | 4 |
| Total | 407 | 417 | 416 | 438 | 447 | 445 | 466 | 468 | 482 | 451 | 434 | 419 |
| | 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 | 1 | 3 | 3 | 5 | 5 | 7 | 7 | 5 | 2 | 1 | 2 | 2 |
| 8F | - | - | - | - | - | - | - | - | - | - | - | - |
| 84 | 310 | 305 | 302 | 280 | 274 | 287 | 304 | 316 | 324 | 327 | 323 | 324 |
| 85 | 48 | 50 | 49 | 41 | 50 | 44 | 45 | 40 | 50 | 53 | 49 | 55 |
| 88 | 56 | 57 | 54 | 51 | 50 | 54 | 55 | 60 | 68 | 67 | 63 | 58 |
| 89 | 6 | 7 | 7 | 8 | 9 | 9 | 9 | 11 | 8 | 7 | 9 | 10 |
| Total | 421 | 422 | 415 | 385 | 388 | 401 | 420 | 432 | 452 | 455 | 446 | 449 |

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 | LASSEN COUNTY | | ALL CMSP COUNTIES | |
|-------------------|---------------------|---------------|---------------------|-------------------|-----------------------|
| | | Using Members | Total Amount Paid | Using Members | Total Amount Paid |
| FY 2006-07 | AMBULANCE | 58 | \$ 51,644 | 5,462 | \$ 2,594,952 |
| FY 2006-07 | CLINIC | 401 | \$ 231,324 | 35,726 | \$ 23,375,726 |
| FY 2006-07 | DENTAL | 70 | \$ 27,551 | 7,251 | \$ 2,704,351 |
| FY 2006-07 | HOME HEALTH/ DME | 37 | \$ 23,426 | 2,329 | \$ 2,439,492 |
| FY 2006-07 | HOSPITAL INPATIENT | 57 | \$ 471,764 | 7,749 | \$ 100,381,246 |
| FY 2006-07 | HOSPITAL OUTPATIENT | 386 | \$ 156,673 | 36,993 | \$ 16,659,526 |
| FY 2006-07 | PHARMACY* | 462 | \$ 348,979 | 43,933 | \$ 31,797,126 |
| FY 2006-07 | PHYSICIAN/ MEDICAL | 416 | \$ 171,285 | 44,187 | \$ 25,102,487 |
| FY 2006-07 | SPECIAL FACILITY | 18 | \$ 2,393 | 758 | \$ 248,332 |
| FY 2006-07 | Total | | \$ 1,485,039 | | \$ 205,303,238 |
| Fiscal Year | Provider Type | Using Members | Total Amount Paid | Using Members | Total Amount Paid |
| FY 2007-08 | AMBULANCE | 54 | \$ 60,171 | 5,970 | \$ 2,729,313 |
| FY 2007-08 | CLINIC | 415 | \$ 258,363 | 38,514 | \$ 26,549,962 |
| FY 2007-08 | DENTAL | 86 | \$ 29,211 | 8,223 | \$ 3,292,370 |
| FY 2007-08 | HOME HEALTH/ DME | 26 | \$ 18,919 | 2,421 | \$ 2,080,165 |
| FY 2007-08 | HOSPITAL INPATIENT | 58 | \$ 595,670 | 7,541 | \$ 102,230,075 |
| FY 2007-08 | HOSPITAL OUTPATIENT | 388 | \$ 213,180 | 40,225 | \$ 19,423,874 |
| FY 2007-08 | PHARMACY | 477 | \$ 353,845 | 45,631 | \$ 33,168,625 |
| FY 2007-08 | PHYSICIAN/ MEDICAL | 444 | \$ 212,434 | 47,261 | \$ 29,582,298 |
| FY 2007-08 | SPECIAL FACILITY | 4 | \$ 832 | 745 | \$ 242,263 |
| FY 2007-08 | Total | | \$ 1,742,625 | | \$ 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
LASSEN COUNTY**

| FY2006/07 | | | |
|-----------|-----|--------|--------------|
| AC | MBR | CLAIMS | PAID |
| 50 | 4 | 24 | \$ 10,683 |
| 8F | - | - | \$ - |
| 84 | 395 | 3,760 | \$ 599,902 |
| 85 | 49 | 351 | \$ 95,987 |
| 88 | 155 | 2,057 | \$ 393,829 |
| 89 | 7 | 36 | \$ 8,108 |
| | 610 | 6,228 | \$ 1,108,509 |

| FY2007/08 | | | |
|-----------|-----|--------|--------------|
| AC | MBR | CLAIMS | PAID |
| 50 | 3 | 16 | \$ 728 |
| 8F | - | - | \$ - |
| 84 | 429 | 4,748 | \$ 785,991 |
| 85 | 39 | 212 | \$ 70,721 |
| 88 | 123 | 1,518 | \$ 404,420 |
| 89 | 13 | 175 | \$ 97,708 |
| | 607 | 6,669 | \$ 1,359,568 |

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

CMSP - December 2009

CMSP
Expenditures by Major Diagnostic Grouping
LASSEN

| | FY2006/07 | FY2007/08 |
|-------------------------------------|---------------------|---------------------|
| CIRCULATORY SYSTEM | \$ 76,974 | \$ 132,343 |
| DIGESTIVE SYSTEM | \$ 164,238 | \$ 223,936 |
| ENDOCRINE, NUTRITIONAL & METABOLIC | \$ 36,635 | \$ 33,525 |
| GENITOURINARY SYSTEM | \$ 36,441 | \$ 46,949 |
| ILL-DEFINED CONDITIONS | \$ 133,946 | \$ 127,759 |
| INFECTIOUS & PARASITIC DISEASES | \$ 46,441 | \$ 20,903 |
| INJURY & POISONING | \$ 162,167 | \$ 146,995 |
| MENTAL DISORDERS | \$ 29,838 | \$ 53,088 |
| MUSCULOSKELETAL & CONNECTIVE TISSUE | \$ 111,596 | \$ 127,951 |
| NEOPLASMS | \$ 54,921 | \$ 103,125 |
| NERVOUS SYSTEM & SENSE ORGANS | \$ 57,551 | \$ 56,531 |
| OTHER | \$ 2,030 | \$ 26,904 |
| RESPIRATORY SYSTEM | \$ 120,666 | \$ 93,960 |
| SKIN & SUBCUTANEOUS TISSUE | \$ 17,753 | \$ 69,439 |
| V CODES | \$ 57,311 | \$ 96,160 |
| | <u>\$ 1,108,508</u> | <u>\$ 1,359,568</u> |

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