

# CMSP Data Update: Sutter 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 2<sup>nd</sup> 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 - Sutter 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
<b>50</b>	39	43	33	31	37	41	33	51	54	45	39	38
<b>8F</b>	2	1	1	1	-	-	-	-	-	-	-	-
<b>84</b>	915	917	878	854	868	843	879	869	892	900	917	928
<b>85</b>	212	238	224	212	199	165	197	211	239	226	237	232
<b>88</b>	88	90	96	90	82	76	82	94	97	100	101	107
<b>89</b>	16	13	16	19	19	17	10	8	6	8	12	13
<b>Total</b>	<b>1,272</b>	<b>1,302</b>	<b>1,248</b>	<b>1,207</b>	<b>1,205</b>	<b>1,142</b>	<b>1,201</b>	<b>1,233</b>	<b>1,288</b>	<b>1,279</b>	<b>1,306</b>	<b>1,318</b>
	Jul-07	Aug-07	Sep-07	Oct-07	Nov-07	Dec-07	Jan-08	Feb-08	Mar-08	Apr-08	May-08	Jun-08
<b>50</b>	41	35	38	36	46	33	32	39	41	43	35	34
<b>8F</b>	-	-	-	-	-	-	-	-	-	-	-	-
<b>84</b>	892	900	893	892	937	940	966	990	1,035	1,043	1,042	1,030
<b>85</b>	209	218	207	218	193	206	201	222	232	220	261	286
<b>88</b>	112	111	98	89	87	86	77	83	85	85	81	84
<b>89</b>	15	15	12	13	12	9	11	13	14	13	17	13
<b>Total</b>	<b>1,269</b>	<b>1,279</b>	<b>1,248</b>	<b>1,248</b>	<b>1,275</b>	<b>1,274</b>	<b>1,287</b>	<b>1,347</b>	<b>1,407</b>	<b>1,404</b>	<b>1,436</b>	<b>1,447</b>
	Jul-08	Aug-08	Sep-08	Oct-08	Nov-08	Dec-08	Jan-09	Feb-09	Mar-09	Apr-09	May-09	Jun-09
<b>50</b>	30	35	33	33	31	36	42	43	34	32	28	27
<b>8F</b>	-	1	3	4	4	3	3	-	-	-	-	-
<b>84</b>	1,043	1,023	1,008	989	991	1,002	1,038	1,075	1,160	1,116	1,093	1,087
<b>85</b>	256	262	260	252	230	214	248	256	248	241	261	275
<b>88</b>	80	77	75	68	59	68	66	71	84	91	97	101
<b>89</b>	13	16	11	6	9	12	11	14	15	12	9	14
<b>Total</b>	<b>1,422</b>	<b>1,414</b>	<b>1,390</b>	<b>1,352</b>	<b>1,324</b>	<b>1,335</b>	<b>1,408</b>	<b>1,459</b>	<b>1,541</b>	<b>1,492</b>	<b>1,488</b>	<b>1,504</b>

**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	SUTTER COUNTY		ALL CMSP COUNTIES	
		Using Members	Total Amount Paid	Using Members	Total Amount Paid
FY 2006-07	AMBULANCE	150	\$ 48,618	5,462	\$ 2,594,952
FY 2006-07	CLINIC	946	\$ 491,611	35,726	\$ 23,375,726
FY 2006-07	DENTAL	282	\$ 123,128	7,251	\$ 2,704,351
FY 2006-07	HOME HEALTH/ DME	67	\$ 38,196	2,329	\$ 2,439,492
FY 2006-07	HOSPITAL INPATIENT	204	\$ 2,467,012	7,749	\$ 100,381,246
FY 2006-07	HOSPITAL OUTPATIENT	1,003	\$ 438,593	36,993	\$ 16,659,526
FY 2006-07	PHARMACY*	1,342	\$ 806,836	43,933	\$ 31,797,126
FY 2006-07	PHYSICIAN/ MEDICAL	1,411	\$ 740,417	44,187	\$ 25,102,487
FY 2006-07	SPECIAL FACILITY	41	\$ 23,744	758	\$ 248,332
<b>FY 2006-07</b>	<b>Total</b>		<b>\$ 5,178,155</b>		<b>\$ 205,303,238</b>
Fiscal Year	Provider Type	Using Members	Total Amount Paid	Using Members	Total Amount Paid
FY 2007-08	AMBULANCE	184	\$ 69,048	5,970	\$ 2,729,313
FY 2007-08	CLINIC	1,087	\$ 576,957	38,514	\$ 26,549,962
FY 2007-08	DENTAL	330	\$ 161,142	8,223	\$ 3,292,370
FY 2007-08	HOME HEALTH/ DME	83	\$ 80,095	2,421	\$ 2,080,165
FY 2007-08	HOSPITAL INPATIENT	233	\$ 3,500,217	7,541	\$ 102,230,075
FY 2007-08	HOSPITAL OUTPATIENT	1,078	\$ 510,263	40,225	\$ 19,423,874
FY 2007-08	PHARMACY	1,425	\$ 897,752	45,631	\$ 33,168,625
FY 2007-08	PHYSICIAN/ MEDICAL	1,470	\$ 1,028,985	47,261	\$ 29,582,298
FY 2007-08	SPECIAL FACILITY	37	\$ 18,352	745	\$ 242,263
<b>FY 2007-08</b>	<b>Total</b>		<b>\$ 6,842,811</b>		<b>\$ 219,298,945</b>

**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  
SUTTER COUNTY**

FY2006/07				FY2007/08			
AC	MBR	CLAIMS	PAID	AC	MBR	CLAIMS	PAID
50	55	297	\$ 179,378	50	54	302	\$ 249,797
8F	3	13	\$ 6,715	8F	-	-	\$ -
84	1,282	12,569	\$ 2,281,067	84	1,402	14,972	\$ 3,839,763
85	225	1,499	\$ 716,573	85	220	1,705	\$ 729,078
88	197	2,570	\$ 892,261	88	210	2,400	\$ 812,502
89	22	261	\$ 172,198	89	21	235	\$ 152,776
	1,784	17,209	\$ 4,248,192		1,907	19,614	\$ 5,783,916

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

**CMSP - December 2009**

**CMSP**  
**Expenditures by Major Diagnostic Grouping**  
**SUTTER**

	<b>FY2006/07</b>	<b>FY2007/08</b>
CIRCULATORY SYSTEM	\$ 580,372	\$ 757,494
DIGESTIVE SYSTEM	\$ 636,439	\$ 678,192
ENDOCRINE, NUTRITIONAL & METABOLIC	\$ 225,377	\$ 250,939
GENITOURINARY SYSTEM	\$ 185,090	\$ 201,722
ILL-DEFINED CONDITIONS	\$ 402,392	\$ 549,418
INFECTIOUS & PARASITIC DISEASES	\$ 205,970	\$ 101,768
INJURY & POISONING	\$ 615,449	\$ 1,562,047
MENTAL DISORDERS	\$ 92,759	\$ 74,635
MUSCULOSKELETAL & CONNECTIVE TISSUE	\$ 278,265	\$ 390,436
NEOPLASMS	\$ 313,066	\$ 272,248
NERVOUS SYSTEM & SENSE ORGANS	\$ 156,082	\$ 153,075
OTHER	\$ 37,948	\$ 64,539
RESPIRATORY SYSTEM	\$ 247,776	\$ 345,025
SKIN & SUBCUTANEOUS TISSUE	\$ 78,781	\$ 152,516
V CODES	\$ 192,427	\$ 229,863
	<u>\$ 4,248,193</u>	<u>\$ 5,783,917</u>

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