

# CMSP Data Update: Tehama 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 - Tehama 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>	13	11	9	9	5	3	7	12	17	20	15	9
<b>8F</b>	-	-	-	-	-	-	-	-	-	-	-	-
<b>84</b>	571	568	584	557	548	545	553	579	609	604	646	674
<b>85</b>	134	134	125	130	127	139	136	139	150	146	146	124
<b>88</b>	105	112	101	115	113	116	124	115	123	121	103	97
<b>89</b>	13	11	9	12	12	13	17	17	19	15	16	15
<b>Total</b>	<b>836</b>	<b>836</b>	<b>828</b>	<b>823</b>	<b>805</b>	<b>816</b>	<b>837</b>	<b>862</b>	<b>918</b>	<b>906</b>	<b>926</b>	<b>919</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>	10	7	6	12	10	11	16	23	23	22	28	24
<b>8F</b>	-	-	-	-	-	-	1	1	1	-	-	-
<b>84</b>	658	677	666	647	655	668	689	727	760	755	744	747
<b>85</b>	126	136	114	126	141	130	140	142	159	146	139	143
<b>88</b>	105	107	99	102	94	93	85	85	87	86	87	96
<b>89</b>	15	14	15	9	13	13	15	16	16	11	12	11
<b>Total</b>	<b>914</b>	<b>941</b>	<b>900</b>	<b>896</b>	<b>913</b>	<b>915</b>	<b>946</b>	<b>994</b>	<b>1,046</b>	<b>1,020</b>	<b>1,010</b>	<b>1,021</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>	19	21	15	17	19	18	20	23	27	26	23	22
<b>8F</b>	-	-	-	-	-	-	-	-	-	-	-	-
<b>84</b>	735	708	683	682	689	718	726	754	778	774	781	778
<b>85</b>	146	160	144	149	134	140	158	152	163	158	150	139
<b>88</b>	101	99	110	117	118	120	126	127	132	115	108	130
<b>89</b>	10	10	11	11	9	15	15	16	15	15	15	13
<b>Total</b>	<b>1,011</b>	<b>998</b>	<b>963</b>	<b>976</b>	<b>969</b>	<b>1,011</b>	<b>1,045</b>	<b>1,072</b>	<b>1,115</b>	<b>1,088</b>	<b>1,077</b>	<b>1,082</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	TEHAMA COUNTY		ALL CMSP COUNTIES	
		Using Members	Total Amount Paid	Using Members	Total Amount Paid
FY 2006-07	Ambulance	113	\$ 63,139	5,462	\$ 2,594,952
FY 2006-07	Clinic	912	\$ 623,539	35,726	\$ 23,375,726
FY 2006-07	Dentist	56	\$ 21,196	7,251	\$ 2,704,351
FY 2006-07	Home Health/ DME	82	\$ 67,458	2,329	\$ 2,439,492
FY 2006-07	Hospital Inpatient	143	\$ 1,315,475	7,749	\$ 100,381,246
FY 2006-07	Hospital Outpatient	748	\$ 340,715	36,993	\$ 16,659,526
FY 2006-07	Pharmacy*	995	\$ 670,063	43,933	\$ 31,797,126
FY 2006-07	Physician/ Medical	982	\$ 510,097	44,187	\$ 25,102,487
FY 2006-07	Special Facility	19	\$ 8,426	758	\$ 248,332
<b>FY 2006-07</b>	<b>Total</b>		<b>\$ 3,620,108</b>		<b>\$ 205,303,238</b>
Fiscal Year	Provider Type	Using Members	Total Amount Paid	Using Members	Total Amount Paid
FY 2007-08	Ambulance	144	\$ 80,109	5,970	\$ 2,729,313
FY 2007-08	Clinic	964	\$ 717,867	38,514	\$ 26,549,962
FY 2007-08	Dentist	61	\$ 24,016	8,223	\$ 3,292,370
FY 2007-08	Home Health/ DME	86	\$ 58,193	2,421	\$ 2,080,165
FY 2007-08	Hospital Inpatient	147	\$ 1,607,811	7,541	\$ 102,230,075
FY 2007-08	Hospital Outpatient	840	\$ 530,131	40,225	\$ 19,423,874
FY 2007-08	Pharmacy	1,024	\$ 754,789	45,631	\$ 33,168,625
FY 2007-08	Physician/ Medical	1,076	\$ 664,804	47,261	\$ 29,582,298
FY 2007-08	Special Facility	18	\$ 10,957	745	\$ 242,263
<b>FY 2007-08</b>	<b>Total</b>		<b>\$ 4,448,677</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  
TEHAMA COUNTY**

FY2006/07				FY2007/08			
AC	MBR	CLAIMS	PAID	AC	MBR	CLAIMS	PAID
50	16	81	\$ 41,998	50	17	120	\$ 64,984
8F	-	-	\$ -	8F	1	14	\$ 1,234
84	921	9,269	\$ 1,741,125	84	1,010	11,870	\$ 2,436,686
85	154	1,041	\$ 354,268	85	155	1,096	\$ 404,410
88	228	2,734	\$ 709,330	88	200	2,217	\$ 611,443
89	27	203	\$ 82,128	89	22	223	\$ 151,115
	1,346	13,328	\$ 2,928,849		1,405	15,540	\$ 3,669,872

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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**  
**TEHAMA**

	<b>FY2006/07</b>	<b>FY2007/08</b>
CIRCULATORY SYSTEM	\$ 314,245	\$ 479,744
DIGESTIVE SYSTEM	\$ 362,381	\$ 326,409
ENDOCRINE, NUTRITIONAL & METABOLIC	\$ 137,019	\$ 102,824
GENITOURINARY SYSTEM	\$ 106,926	\$ 122,186
ILL-DEFINED CONDITIONS	\$ 242,921	\$ 316,021
INFECTIOUS & PARASITIC DISEASES	\$ 111,445	\$ 191,863
INJURY & POISONING	\$ 431,013	\$ 539,255
MENTAL DISORDERS	\$ 44,859	\$ 79,706
MUSCULOSKELETAL & CONNECTIVE TISSUE	\$ 299,717	\$ 303,597
NEOPLASMS	\$ 174,278	\$ 453,837
NERVOUS SYSTEM & SENSE ORGANS	\$ 98,468	\$ 98,071
OTHER	\$ 27,301	\$ 19,018
RESPIRATORY SYSTEM	\$ 199,008	\$ 218,634
SKIN & SUBCUTANEOUS TISSUE	\$ 102,648	\$ 77,201
V CODES	\$ 276,620	\$ 341,506
	<u>\$ 2,928,849</u>	<u>\$ 3,669,872</u>

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